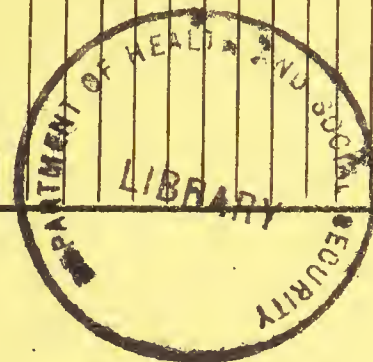


II



THE
ANNUAL
REPORTS
OF THE
COUNTY
MEDICAL
OFFICER
OF
HEALTH
AND
PRINCIPAL
SCHOOL
MEDICAL
OFFICER

COUNTY
OF
LINCOLN
PARTS OF
KESTEVEN
1972



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**COUNTY OF LINCOLN
PARTS OF KESTEVEN**

1972

**Annual Reports
of the
County Medical Officer of Health
and
Principal School Medical Officer**

CONTENTS

	Page
PREFACE	3
HEALTH COMMITTEE	7
EDUCATION COMMITTEE	8
STAFF	9
PART I – Statistics and Social Conditions	14
PART II – Epidemiology	24
PART III – Vaccination and Immunisation	29
PART IV – Care of Mothers and Young Children	32
PART V – Nursing Service	38
PART VI – Ambulance Service	42
PART VII – Prevention of Illness, Care & After-Care	45
PART VIII – Other Services	49
PART IX – Environmental Health Services	51
PART X – School Health Service	55
INDEX	82

PREFACE

*To the Chairman, Aldermen and Members of the
Kesteven County Council*

I have pleasure in presenting my annual reports on the health of the County and the school child for the year 1972.

The vital statistics show that while fewer babies were born in the County in 1972 than in the previous year, the birth rate at 16.5 was above the national birth rate of 14.8. There were 41 infant deaths in the County giving an infant mortality rate of 15 compared with a national infant mortality rate of 17.

There were 1,847 deaths from all causes during the year. Ischaemic heart disease was again the main killer and 78 people died from cancer of the lung. Influenza and other chest illness was prevalent towards the end of the year and 155 people died from pneumonia and/or influenza during the year as compared with 97 deaths from these two causes in 1971.

An attack of venereal disease may result in chronic ill health or sterility for a proportion of those so infected and in recent years it has been necessary to report increases annually in the number of patients diagnosed as suffering from venereal disease attending at the special treatment centres at hospitals in the area. During 1972 there were 254 patients diagnosed as suffering from venereal disease and while this figure is more than three times as high as the 1962 figure of 84 patients, it is six fewer than last year's high total of 260 patients.

Mothers of young children continued to use our infant welfare centres and more than four out of five children born in the County received immunisation against poliomyelitis and diphtheria at these centres or from their family doctor.

The demands made on our ambulance and nursing services were considerable. An increasing number of mothers were delivered of their babies in hospital and similarly an increasing number of mothers were discharged to the care of the district midwives between the second and seventh day after delivery.

There was an increasing interest shown by general practitioners in practising from health centres and at the end of the year three health centres were at various stages of planning.

The County Council continued to give financial support to voluntary clubs providing chiropody services for old and handicapped people and the number of chiropody treatments provided under this scheme again increased.

Reorganisation was a word that was frequently heard in 1972, and the Local Government Act 1972 was placed on the statute book. A White

Paper on the National Health Service was published at the beginning of August, and a Bill to reorganise the National Health Service was presented to Parliament in November. The Bill proposes the abolition of Boards of Governors of Teaching Hospitals, Regional Hospital Boards, Hospital Management Committees, Executive Councils and Local Health Authorities, and their replacement by a two tier structure of *ad hoc* bodies under the Department of Health and Social Security. The first tier will consist of fourteen Regional Health Authorities (RHAs) and the second will consist (outside London) of 75 Area Health Authorities (AHAs). General practitioners will retain their independent contractual status and the Executive Council will be replaced by a Family Practitioner Committee of similar composition. The School Health Service will, for the first time, become part of the National Health Service. The boundaries of the RHAs will be similar to those of the present Regional Hospital Boards. Each RHA will probably consist of about 15 members, all appointed by the Secretary of State but including persons nominated by the local authorities in the region.

Each AHA will probably also consist of about 15 members and a number of them (not fewer than four is proposed) will be nominated by the matching local authority. This common membership will help to ensure co-operation and co-ordination between the two authorities. The Bill proposes that statutory Joint Collaboration Committees shall be established in each area consisting of members of the health and local authorities, and served by senior officers of the respective authorities.

There will be one Committee for collaboration with the matching authority, dealing particularly with joint planning of health and social services and with the child health and education services. There will be a second Joint Collaboration Committee established for each non-metropolitan County, and whose local authority membership will be drawn mainly from the new district councils. This Committee will be concerned with ensuring co-operation between the AHA's services and the related environmental services, particularly housing. Membership of the AHA will also include at least one doctor and one nurse, and the authority will receive advice from professional advisory committees. Similar Committees were required by the National Health Service Act of 1946 to advise each Executive Council and are a well established feature of the professional advisory machinery.

In the area of each AHA there is to be at least one Community Health Council. This Council, which will be statutory, will probably consist of twenty to thirty members. Half the membership will be appointed by the new district councils; one-third by selected voluntary bodies and one-sixth by the AHA. This Council represents the voice of the consumer in the planning and administration of the local health services.

Each AHA will consist of one or more health districts, and the size of the district is largely determined by the catchment area of a district general hospital. There will be no statutory health authority at district level but the

primary planning unit will be a District Management Team consisting of a consultant and a general practitioner nominated by the District Medical Committee and four officers appointed by the AHA, namely, an administrator, a community physician, a finance officer and a nursing officer. These six people will be jointly responsible to the AHA for formulating plans for the health services in the district and for co-ordinating the implementation of the plans which are subsequently approved by the AHA and RHA. Each District Management Team will be advised by a number of health care planning teams on the needs of certain groups such as the elderly and the mentally handicapped.

The reorganised Health Service is to come formally into existence on 1st April, 1974, when the RHAs and AHAs take over responsibility from the present statutory bodies. The RHAs and AHAs will probably be appointed in 'shadow' form in the autumn of 1973. In order to carry out as much as possible of the necessary preparatory work, Joint Liaison Committees (JLCs) have been established for each new area and each new region. A great deal of preparatory work in collecting information and identifying problems has already been accomplished, and the shadow AHAs and RHAs will look to their JLCs for information and guidance. It should be noted, however, that the JLCs are advisory bodies. They have no power to pre-empt decisions and they will cease to exist when the new health authorities are established.

It will be seen that a single authority will be responsible for planning and co-ordinating the personal health services of an area. In any reorganisation, however, there are likely to be disadvantages and it is to be hoped that the new structure may not be less flexible and provide less encouragement for the initiation of new schemes. Greater efforts will certainly be needed to maintain the necessary links with local authorities in respect of social and education services. Reorganisation inevitably results in anxiety and insecurity in those staffs who are likely to be significantly affected by the transfer and this must, if only in short-term, have an adverse effect on the service.

The proposed arrangements have been set out at some length because they represent the greatest change since the present tripartite structure was established twenty-five years ago, and could determine the pattern of the health services for the remainder of this century. The sole object of reorganisation is to provide, with the same resources, a better service to patients and to the community as a whole, and in these terms must the value of reorganisation ultimately be judged.

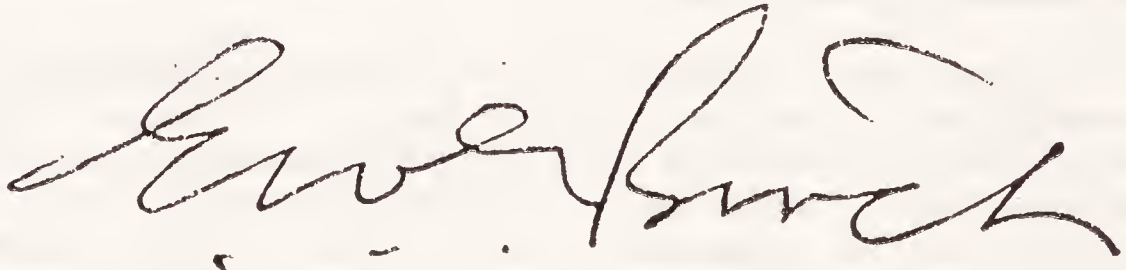
The general health of schoolchildren in the County was good. There was, however, an increase in the number of children found to have heads infested with lice or nits and while the incidence is still very low by national standards, it is important that parents and teachers should continue to take a keen interest in the cleanliness of children's hair. The present fashion for long hair obviously provides many hiding places for lice and their eggs.

Twenty-five schools were operating their own swimming pools at the end of the year, and I make no apologies for reminding those concerned with the provision and running of school swimming pools that it is essential in the interests of health and safety that swimming bath water is adequately chlorinated and filtered at all times and that the baths should not be overcrowded or over-used.

It is a very real pleasure and privilege to thank all the volunteers who have helped in the running of the County Health Services and also the voluntary organisations and groups of people who have donated items of equipment and sums of money for the good of the service.

It is a pleasure also to thank the Chairman and Vice-Chairman of the Health Committee and members of the Council for their support and encouragement, and I am grateful to colleagues in other departments, authorities and agencies for their help and co-operation.

The imminence of reorganisation meant that the year was an anxious and arduous one for the staff of this department and I am more than grateful to all members of the staff for their support and hard work during the year.

A handwritten signature in dark ink, appearing to read 'G. W. Burch', with a large, sweeping flourish at the end.

Public Health Department,
County Offices,
SLEAFORD, Lincs.

*County Medical Officer of Health
Principal School Medical Officer*

HEALTH COMMITTEE

(Constitution as at 31st December, 1972)

Chairman:

Alderman S. P. KING, O.B.E.

Vice-Chairman:

Councillor Mrs. E. C. PACKER, B.E.M.

Aldermen:

J. H. LEWIS, D.L.
Chairman of the County
Council (ex-officio)
J. W. HARRISON

H. P. KELWAY, F.C.A.
Vice-Chairman of the County
Council (ex-officio)

Councillors:

F. E. ATKIN
Mrs. M. BANGAY
Mrs. G. I. BLACK
Mrs. G. M. BOYFIELD
Mrs. G. M. BRIGGS
G. G. CROWSON
Mrs. E. DAVIES
Mrs. L. DICKINSON
Mrs. W. A. S. FALLA
T. W. F. HALL
W. R. HARRISON, M.B.E.

Revd. P. B. HEARN
H. KNOWLES
C. E. MARSHALL
Mrs. E. M. MAWER
Mrs. F. McCALLUM
Mrs. K. D. PORTER
H. SCARBOROUGH
R. K. M. TALLENTS
Mrs. J. A. UNDERWOOD
R. W. YATES

Co-opted Members:

Mrs. C. A. BAKER
Councillor W. BEVAN
Mrs. A. E. MILLETT
Mrs. P. M. B. SMALLHORN

Representing Kesteven Local Medical and Panel Committee:

A. M. GORDON, M.B., Ch.B.

Representing Kesteven Local Dental Committee:

F. H. WALLACE, L.D.S., R.C.S., (ENG).

EDUCATION COMMITTEE

(Constitution as at 31st December, 1972)

Chairman:

Alderman Mrs. M. LARGE, M.A., B.Comm.

Vice-Chairman:

Alderman P. NEWTON

Aldermen:

A. E. BELLAMY
H. H. BROWNLOW
H. P. KELWAY, F.C.A. (ex-officio)
J. H. LEWIS, D.L. (ex-officio)

J. Q. M. LONGSTAFFE
Brig. F. McCALLUM,
C.I.E., O.B.E., M.C., D.L.
H. F. STEWARD

Councillors:

W. BEVAN
Mrs. G. M. BOYFIELD
G. G. CROWSON
Mrs. E. DAVIES
N. S. DAY, M.A.
Miss B. M. DIBB, M.A.
I. G. GORDON
W. R. HARRISON, M.B.E.
Revd. P. B. HEARN
H. C. JOHNSON

C. J. POPE
Mrs. K. D. PORTER
E. A. ROBERTSON
R. G. SIMPSON
G. C. SWANSON
Mrs. M. TOULSON
L. W. H. WARNER
W. R. WYRILL
R. W. YATES

NOMINATED MEMBERS

Mr. G. W. HOUGHTON	..	To represent the N.U.T.
Miss D. E. MOULDING	..	
Mr. M. CLARK	..	To represent the Church of England
Rev. P. H. FOSTER	..	To represent the Free Churches
Rev. Fr. JARLATH McDONAGH		To represent the Roman Catholic Church
Mr. S. R. DAWES, M.A., B.Sc.	..	To represent the A.T.C.D.E.
Mr. F. L. SPURR	..	To represent the A.T.T.I.
Mr. R. P. FOSTER	..	To represent the Joint Four Secondary Association
Mr. F. T. RYAN	..	To represent the National Association of Schoolmasters
Mr. B. B. ROWAN	..	To represent the N.F.H.T. Association

PUBLIC HEALTH OFFICERS OF THE COUNTY COUNCIL

County Medical Officer of Health and Principal School Medical Officer:

E. W. G. BIRCH, D.F.M., M.B., B.S., M.R.C.S., L.R.C.P., M.F.C.M., D.P.H.

Official Address: Public Health Department, County Offices, Sleaford
Telephone—Sleaford 3241

Deputy County Medical Officer of Health and Deputy Principal School Medical Officer:

E. ANNE WHITELEY, M.B., Ch.B., M.F.C.M.

Assistant County Medical Officers, District Medical Officers of Health and School Medical Officers: (Part-time):

C. W. SHEARER, M.B., Ch.B., M.F.C.M., D.P.H.

H. ELLIS SMITH, M.B., Ch.B., B.A.O., M.F.C.M., D.P.H.

1 vacancy

Assistant County Medical Officer and School Medical Officer:

PATRICIA A. MORRIS, M.B., Ch.B.

17 medical practitioners (Part-time) Sessional basis

Consultant Chest Physicians:

G. B. ROYCE, B.S., M.B., Ch.B.

J. B. WILKINSON, B.M., B.Ch.

(joint appointments with R.H.B.s)

Consultant Staff:

The part-time services of the following consultants have been made available during the year to this Authority by arrangements with the East Anglian and Sheffield Regional Hospital Boards:—

Orthopaedic Surgeons:

I. McKECHNIE, F.R.C.S. (Ed.), L.R.C.P., L.R.C.S. (Ed.), L.R.F.P.S.

D. F. THOMAS, M.B., B.Ch., B.A.O., F.R.C.S., Ph.D., B.D.

Ophthalmic Surgeons:

G. M. BARLING, M.B., Ch.B., D.O.M.S.

A. H. BRIGGS, M.Sc., M.B., Ch.B., D.O.M.S.

B. A. CHAUDHARY, M.B., B.S., D.T.M. & H., D.O.

S. P. REDMOND, M.B., B.Ch., B.A.O., D.O.M.S.

Ear, Nose and Throat Surgeons:

A. A. FINLAYSON, M.B., Ch.B., F.R.C.S.

H. E. PORTE, F.R.C.S. (Ed.), D.L.O.

Dermatologists:

R. B. FOUNTAIN, M.B., B.S., M.R.C.P.
D. I. McCALLUM, M.B., Ch.B., M.R.C.P., D.P.H.

Chief Dental Officer and Principal School Dental Officer:

J. E. MANN, L.D.S., R.C.S.

Area Dental Officers:

Miss P. DICKENS, B.D.S., (Appointed 2.10.72)
W. GARETH THOMAS, L.D.S., R.C.S.
1 vacancy

Anaesthetists (part-time):

N. H. BLOOM, M.R.C.S., L.R.C.P., F.F.A.R.C.S., D.A.
A. CAMPBELL HOLMS, M.B., Ch.B., F.F.A.R.C.S., D.A.

Consultant Children's Psychiatrist:

VERA HOLDWAY, B.A., M.R.C.S., L.R.C.P., D.P.M., M.R.C.Psych.

Dental Surgery Assistants:

Mrs. G. FERNEE (Resigned 28.7.72)
Mrs. C. B. LANG (part-time)
Mrs. M. SHRIGLEY (Appointed 17.10.72) (Part-time)
Mrs. W. M. SPRINGFIELD (part-time)
Mrs. D. J. THOMPSON (Appointed 10.10.72) (part-time)
Miss A. M. TURNER
Miss C. M. WILLOWS
1 vacancy

Public Analyst (part-time):

E. R. W. FOGDEN, B.Sc., F.R.I.C.

Director of Nursing Services:

Non-Medical Supervisor of Midwives:

Miss L. DICK, S.R.N., S.C.M., H.V.Cert.

Area Nursing Officers:

Miss S. M. CRAWSHAW, S.R.N., S.C.M., H.V.Cert. (Appointed 1.6.72)
1 vacancy

County Health Visitors/School Nurses:

Mrs. M. J. BARDEN, S.R.N., S.C.M., H.V.Cert. (part-time). (Appointed 1.11.72)
 Mrs. D. E. BLACKETT, S.R.N., S.C.M., H.V.Cert.
 Miss O. A. BROOKS, S.R.N., S.C.M., H.V.Cert. (Resigned 16.11.72)
 Miss B. K. P. BROWN, S.R.N., S.C.M., Q.N., H.V.Cert. (part-time). (Resigned 25.6.72)
 Miss S. M. CRAWSHAW, S.R.N., S.C.M., H.V.Cert. (Transferred to post of A.N.O. 1.6.72)
 Miss M. A. DANIELS, S.R.N., S.C.M., S.R.F.N., H.V.Cert.
 Miss J. E. DAWSON, S.R.N., S.C.M., H.V.Cert.
 Mrs. M. A. DAWSON, S.R.N., S.C.M., H.V.Cert. (Appointed 17.4.72)
 Miss M. A. HETHERINGTON, S.R.N., S.C.M., H.V.Cert.
 Mrs. H. HEUGHAN, S.R.N., S.C.M., H.V.Cert.
 Mrs. S. G. LYON, S.R.N., S.C.M., (Pt. 1), H.V.Cert. (Appointed 1.4.72 – Resigned 31.8.72)
 Miss A. M. RANKS, S.R.N., S.C.M., H.V.Cert. (Appointed 1.11.72)
 Mrs. P. SUMNER, S.R.N., S.C.M., H.V.Cert.
 Mrs. M. M. TUCKER, S.R.N., S.C.M., (Pt. 1), H.V.Cert.

School Nurses:

Mrs. B. M. BEALE, S.R.N. (part-time)
 Miss D. A. BENNETT, S.R.N.
 Mrs. J. M. DAWE, S.R.N.
 Miss E. W. HENFREY, S.R.N.
 Mrs. C. A. LINGARD, S.R.N. (part-time)
 Mrs. P. J. STEVENSON, S.R.N.
 Mrs. J. A. WILKINS, S.R.N. (Part-time)

Also 19 District Nurse/Midwives and 2 District Nurses act as part-time Health Visitors/School Nurses

Physiotherapists:

Mrs. L. A. BRENDON, M.C.S.P. (Resigned 14.4.72)
 Mrs. M. S. GOY, M.C.S.P. (part-time). (Resigned 28.9.72)
 Mrs. S. E. HURST, M.C.S.P. (Appointed 30.10.72) (part-time)
 Mrs. E. K. KENDALL, M.C.S.P. (Appointed 14.10.72)
 Mrs. R. QUANTRILL, M.C.S.P. (part-time)

Speech Therapists:

Mrs. G. W. EMERY, L.C.S.T. (part-time)
 Miss D. M. GLOVER, L.C.S.T.
 Mrs. M. L. LONG, L.C.S.T. (part-time)

Chiropodist:

Mrs. M. J. WESTCOMBE, S.R.Ch. (part-time)

Social Worker, Child Guidance Service:

Mrs. M. V. COUPLAND, Certificate in Social Studies (part-time)

County Health Inspector:

J. F. LOFTHOUSE, M.A.P.H.I., Certificated Inspector of Meat and Foods,
Certificated Public Health Engineer

Chief Clerk:

A. COLLEY

Assistant Chief Clerk:

G. H. DOBBS

County Ambulance and Transport Officer:

H. SANDS, F.I.A.O., F.I.C.A.P.

DISTRICT MEDICAL OFFICERS OF HEALTH AND PUBLIC HEALTH INSPECTORS

District	Medical Officer of Health (all part-time appointments)	Chief Public Health Inspector
Borough of Grantham	C. W. Shearer, M.B., Ch.B., M.F.C.M., D.P.H.	C. Taylor, M.A.P.H.I.
Borough of Stamford	H. Ellis Smith, M.B., B.Ch., B.A.O., M.F.C.M., D.P.H.	G. Fox, M.A.P.H.I.
Urban District of Sleaford	J. Scholey, M.B., Ch.B. (Acting)	T. E. Dagwell, M.R.S.H., M.A.P.H.I.
Urban District of Bourne	H. Ellis Smith, M.B., B.Ch., B.A.O., M.F.C.M., D.P.H.	M. Silverwood, M.R.S.H.
Rural District of North Kesteven	J. F. Adam, M.B., B.S., D.R.C.O.G. (Acting)	J. Freeman, M.I.Mun.E., M.R.S.H., M.A.P.H.I.
Rural District of East Kesteven	J. Scholey, M.B., Ch.B. (Acting)	J. A. Saville, M.A.P.H.I., M.R.I.P.H.H.
Rural District of South Kesteven	H. Ellis Smith, M.B., B.Ch., B.A.O., M.F.C.M., D.P.H.	W. A. Chivers, M.R.S.H., M.A.P.H.I.
Rural District of West Kesteven	C. W. Shearer, M.B., Ch.B., M.F.C.M. D.P.H.	M. F. Johnson, M.A.P.H.I. C.R.S.H.

Part 1 - Statistics and Social Conditions

GENERAL STATISTICS

Area of Administrative County (in acres)	461,082
Population—Registrar General's Estimate (mid-year 1972)	161,520
Rateable value (1st April 1972)	£5,252,399
Estimated product of a penny rate 1972-73	£51,100

VITAL STATISTICS

The figures given in brackets in the following tables are comparative figures for 1971:—

Live Births

	Males	Females	Total
Legitimate	1,333	1,180	2,513 (2,615)
Illegitimate	71	78	149 (142)
Total	1,404	1,258	2,662 (2,757)

Live Birth Rate per 1,000 population:

Crude	16.5 (17.2)
Nett	16.0 (17.4)
Rate for England and Wales	14.8 (16.0)

Illegitimate Live Births per cent of

total live births	6.0 (5.0)
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Still Births

	Males	Females	Total
Legitimate	18	11	29 (29)
Illegitimate	1	3	4 (1)
Total	19	14	33 (30)

Still Birth Rate per 1,000 Live

and Still Births	12 (11)
--------------------------	---------

Rate for England and Wales	12 (12)
------------------------------------	---------

Total Live and Still Births

	Males	Females	Total
Legitimate	1,351	1,191	2,542 (2,644)
Illegitimate	72	81	153 (143)
Total	1,423	1,272	2,695 (2,787)

The following table gives comparative statistics relating to births in the Administrative County since 1963:—

Year	LIVE BIRTHS				STILLBIRTHS	
	Legitimate	Illegitimate	Total	Rate (per 1,000 pop.)	No.	Rate (per 1,000 Total births)
1963	2,518	120	2,638	18.64	40	14.9
1964	2,474	110	2,584	17.95	40	15.2
1965	2,500	124	2,624	17.92	37	13.9
1966	2,625	152	2,777	18.56	29	10.33
1967	2,559	151	2,710	17.71	34	12.39
1968	2,515	153	2,668	17.34	39	14.4
1969	2,464	157	2,621	16.60	35	13.0
1970	2,656	146	2,802	17.50	28	10.0
1971	2,615	142	2,757	17.20	30	11.0
1972	2,513	149	2,662	16.50	33	12.0

Infant Deaths (Deaths under one year of age)

			Males	Females	Total
Legitimate	..	..	18	19	37 (38)
Illegitimate	..	..	2	2	4 (4)
Total	..	..	20	21	41 (42)

Infant Mortality Rates:

Total infant deaths per 1,000 total live births	..	..	15 (15)
Legitimate infant deaths per 1,000 legitimate live births	..	..	15 (15)
Illegitimate infant deaths per 1,000 illegitimate live births	..	..	27 (28)
Infant Mortality Rate for England and Wales	..	..	17 (18)

Neonatal Deaths (Deaths under four weeks of age)

	Males	Females	Total
	15	13	28 (32)
Neonatal Mortality Rate per 1,000 total live births	..	..	11 (12)
Rate for England and Wales	..	..	12 (12)

Early Neonatal Deaths (Deaths under one week of age)

	Males	Females	Total
	12	12	24 (29)
Early Neonatal Mortality Rate per 1,000 total live births	..	..	9 (11)
Rate for England and Wales	..	..	10 (10)

Perinatal Mortality (Stillbirths and deaths under one week combined)

	Males	Females	Total
	31	26	57 (59)
Perinatal Mortality Rate per 1,000 total live and stillbirths	..	..	21 (21)
Rate for England and Wales	..	..	22 (22)

Infant Deaths and Rates in each of the past 10 years:—

Year	Deaths (Infants under 1 year)	Rate per 1,000 total live births	Rate for England & Wales
1963	46	17.44	21.1
1964	55	21.28	19.9
1965	44	16.77	19.0
1966	52	18.72	19.0
1967	34	12.55	18.3
1968	41	15.36	18.3
1969	56	21.00	18.0
1970	41	15.00	18.0
1971	42	15.00	18.0
1972	41	15.00	17.0

Maternal Deaths (including abortion) Nil (3)

Maternal Mortality Rate per 1,000 live and stillbirths	..	0.00	(1.07)
Rate for England and Wales	..	0.15	(0.17)

Deaths from all Causes (including members of the armed forces stationed in the area)

	Males	Females	Total
	961	886	1,847 (1,699)
Crude Death Rate per 1,000 estimated population	..	11.4	(10.6)
Nett Death Rate per 1,000 estimated population	..	11.4	(9.6)
Rate for England and Wales	..	12.1	(11.6)

Table I on page 19 gives details of the population and main vital statistics for each county district.

Causes of Death

Tables II and III on pages 20 to 23 give details provided by the Registrar General of the number and causes of death in Kesteven during 1972.

Main Causes of Death in Kesteven 1972	No. of deaths	Rate per 1,000 of estimated population
1. Ischaemic Heart Disease ..	461	2.85
2. Cerebrovascular Disease	272	1.68
3. Pneumonia	140	0.87
4. Other forms of Heart Disease	130	0.80
5. Other disease of circulatory system ..	105	0.65
6. Other malignant neoplasms, etc. ..	83	0.51
7. Malignant neoplasm, lung, bronchus ..	78	0.48
8. Malignant neoplasm, intestine	63	0.39
9. Bronchitis, emphysema	47	0.29
10. Malignant neoplasm, stomach	29	0.18

Infant Mortality rates in Kesteven from 1922 - 1972

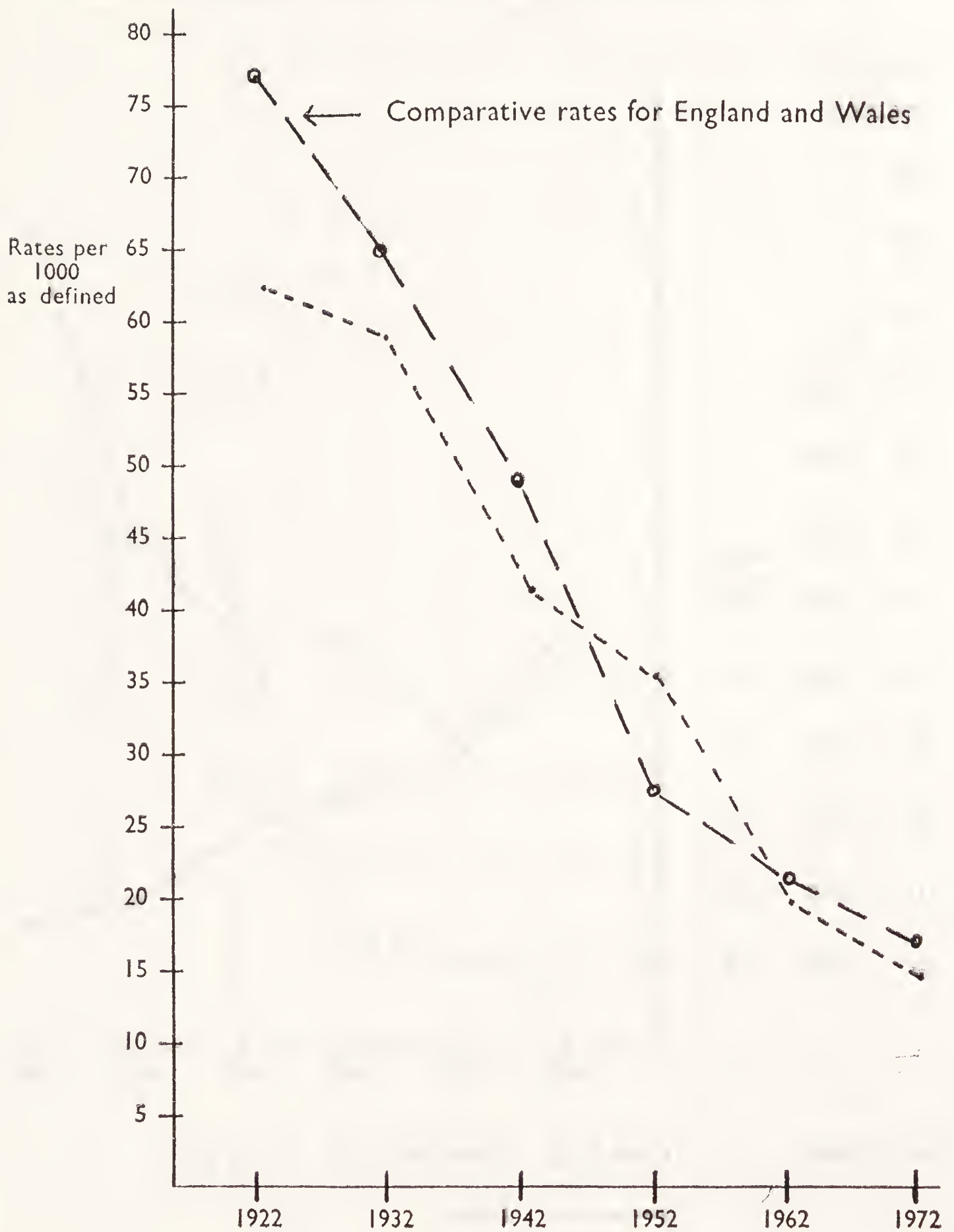
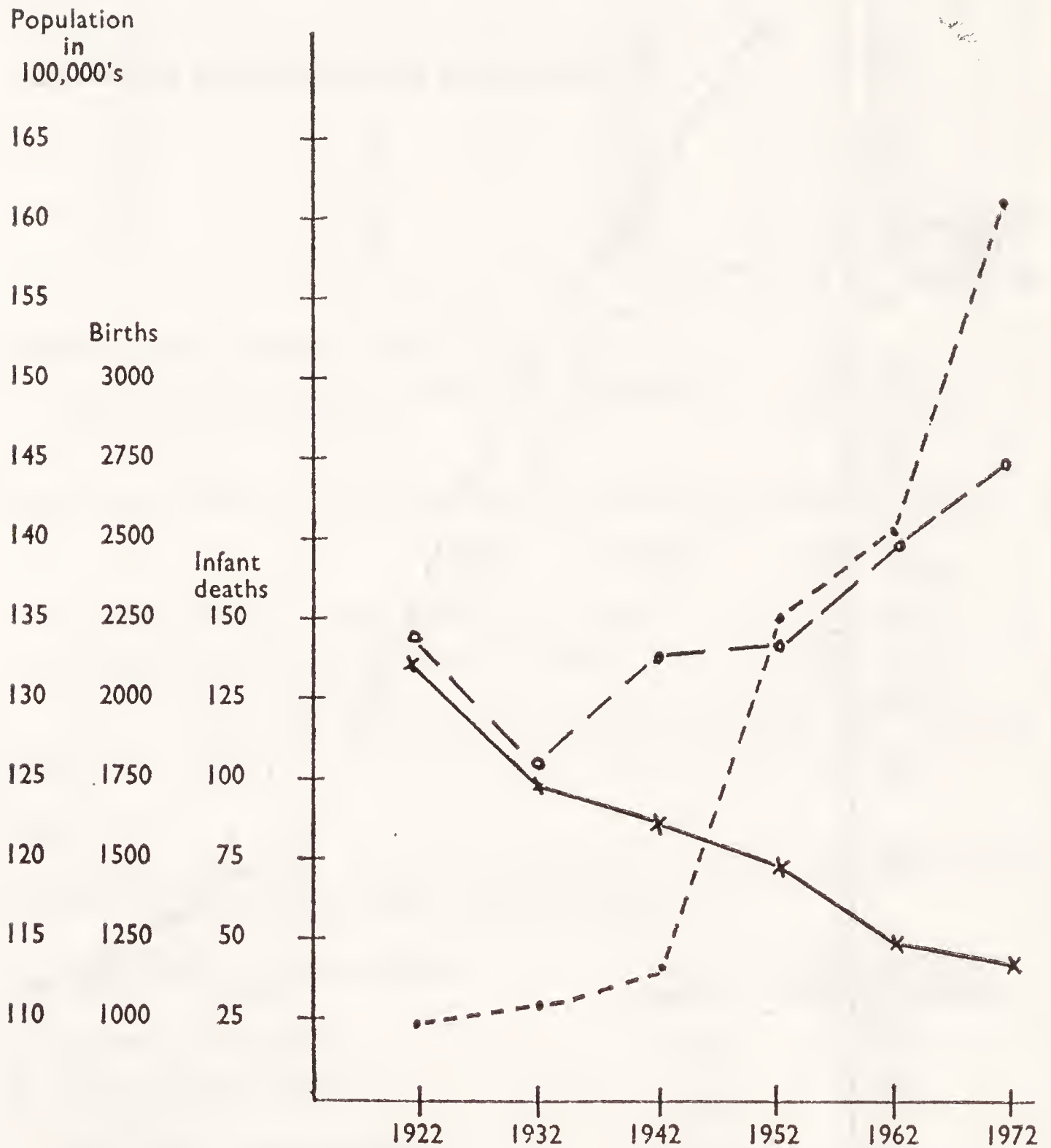


Table showing number of births, infant deaths and the increase in the population in Kesteven from 1922 - 1972



Key to table :

- Population
- Births
- ×— Infant deaths

TABLE 1 — VITAL STATISTICS 1972

Popul'n Mid- year 1972 (R. G. Est.)	No. of Live Births			Crude Birth Rate		Nett Birth Rate		No. of Still-Births			Deaths under 1 year of age			Inf. Mort. Rate		No. of Deaths		Crude Death Rate		Nett Death Rate	
	M		F	Total		Total		M		F	M		F	Total		M		Total		Total	
Bourne	66	44		110	16.7	17.0		1	1	2	—	2	2	18		44	51	95	14.5	13.1	
Grantham	230	226		456	16.2	15.9		2	2	4	5	5	10	22		182	183	365	13.0	13.0	
Sleaford	57	50		107	13.1	14.7		4	1	5	1	1	2	19		75	88	163	20.0	12.4	
Stamford	100	95		195	13.3	14.1		1	1	2	—	—	—	—		96	89	185	12.6	9.7	
Total M.B.'s and Urban Districts	453	415		868	15.1	15.4		8	5	13	6	8	14	16		397	411	808	14.1	12.0	
East Kesteven	196	164		360	16.5	16.3		4	1	5	3	3	6	17		118	104	222	10.1	11.1	
North Kesteven	398	359		757	16.9	15.4		5	8	13	7	6	13	17		232	190	422	9.4	10.5	
South Kesteven	181	147		328	18.5	17.6		1	—	1	—	1	1	3		103	72	175	9.9	10.8	
West Kesteven	176	173		349	17.8	16.7		1	—	1	4	3	7	20		111	109	220	11.2	12.2	
Total Rural Districts	951	843		1,794	17.2	16.2		11	9	20	14	13	27	15		564	475	1,039	10.0	11.1	
Total Administrative County	1,404	1,258		2,662	16.5	16.0		19	14	33	20	21	41	15		961	886	1,847	11.4	11.4	

**TABLE II—SHOWING FOR EACH COUNTY DISTRICT THE
NUMBER AND CAUSES OF DEATH DURING 1972**

CAUSES OF DEATH	Bourne U.D.	Grantham Borough	Sleaford U.D.	Stamford Borough	Aggregate	E. Kesteven R.D.	N. Kesteven R.D.	S. Kesteven R.D.	W. Kesteven R.D.	Aggregate	TOTALS
Tuberculosis of respiratory system	—	—	1	—	1	—	—	—	—	—	1
Other tuberculosis, inc. late effects	—	—	—	—	—	—	2	—	—	2	2
Streptococcal sore throat, scarlet fever	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infection	—	—	—	—	—	—	1	—	—	1	1
Measles	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases	—	—	—	—	—	1	—	—	—	1	1
Malignant neo- plasm, buccal cavity, etc.	—	3	—	1	4	—	1	1	1	3	7
Malignant neo- plasm,, oeso- phagus	—	2	4	2	8	1	1	2	3	7	15
Malignant neo- plasm, stomach	2	6	3	4	15	2	3	4	5	14	29
Malignant neo- plasm, intestine	4	9	6	9	28	10	11	3	11	35	63
Malignant neo- plasm, Larynx	—	—	1	—	1	—	—	2	—	2	3
Malignant neo- plasm, lung, bronchus	4	15	7	7	33	7	22	11	5	45	78
Malignant neo- plasm, breast	2	11	2	4	19	3	10	2	3	18	37
Malignant neo- plasm, uterus	2	2	—	2	6	2	3	2	3	10	16
Malignant neo- plasm, prostate	1	1	2	1	5	1	3	2	2	8	13
Leukaemia	—	—	—	1	1	2	1	1	—	4	5
Other malignant neoplasms	3	20	6	9	38	9	18	9	9	45	83
Benign & unspeci- fied neoplasms	1	1	—	—	2	—	—	2	—	2	4
Diabetes mellitus	1	7	3	2	13	—	3	—	4	7	20
Avitaminoses, etc.	—	—	—	—	—	—	1	—	—	1	1
Other endocrine etc. diseases	—	2	2	1	5	1	3	—	—	4	9
Anaemias	—	—	2	1	3	—	1	—	—	1	4
Mental disorders	—	—	2	—	2	—	8	—	—	8	10
Multiple sclerosis	—	1	—	1	2	—	1	—	—	1	3
Meningitis	—	—	—	—	—	—	—	—	—	—	—
Other diseases of nervous system etc.	—	3	2	6	11	2	5	2	2	11	22
Chronic rheumatic heart disease	—	3	1	1	5	1	6	1	3	11	16
Hypertensive disease	1	4	3	2	10	3	5	—	3	11	21

TABLE II — SHOWING FOR EACH COUNTY DISTRICT THE NUMBER AND CAUSES OF DEATH DURING 1972—(Contd.)

CAUSES OF DEATH	Bourne U.D.	Grantham Borough	Sleaford U.D.	Stamford Borough	Aggregate	E. Kesteven R.D.	N. Kesteven R.D.	S. Kesteven R.D.	W. Kesteven R.D.	Aggregate	TOTALS
Ischaemic heart disease	21	95	24	40	180	68	118	41	54	281	461
Other forms of heart disease	12	24	21	20	77	13	14	16	10	53	130
Cerebrovascular disease	17	67	19	21	124	31	48	26	43	148	272
Other diseases of circulatory system	5	21	10	10	46	18	12	12	17	59	105
Influenza	1	5	—	—	6	2	4	—	3	9	15
Pneumonia	4	13	24	18	59	16	49	9	7	81	140
Bronchitis and emphysema	1	6	3	2	12	5	20	2	8	35	47
Asthma	1	—	—	—	1	—	1	—	—	1	2
Other diseases of respiratory system	1	1	1	—	3	3	1	2	4	10	13
Peptic ulcer	2	2	1	4	9	—	1	1	—	2	11
Appendicitis	—	—	—	—	—	—	—	—	—	—	—
Intestinal obstruction and hernia	1	2	—	1	4	—	2	—	—	2	6
Cirrhosis of liver	—	3	—	2	5	1	—	—	—	1	6
Other diseases of digestive system	1	5	—	1	7	—	5	2	3	10	17
Nephritis and Nephrosis	1	—	—	3	4	—	—	1	2	3	7
Hyperplasia of prostate	—	1	—	—	1	2	—	—	—	2	3
Other diseases, genito-urinary system	1	6	2	2	11	1	5	1	—	7	18
Other complications of pregnancy, etc.	—	—	—	—	—	—	—	—	—	—	—
Diseases of musculo-skeletal system	—	2	—	2	4	—	—	—	—	—	4
Congenital anomalies	—	1	1	2	4	1	2	1	3	7	11
Birth injury, difficult labour etc.	1	3	—	—	4	1	6	—	2	9	13
Other causes of perinatal mortality	—	2	1	—	3	2	2	—	3	7	10
Symptoms and ill-defined conditions	1	6	—	—	7	—	3	4	1	8	15
Motor vehicle accidents	—	3	2	—	5	9	8	8	3	28	33
All other accidents	3	5	4	1	13	2	6	5	2	15	28
Suicide and self-inflicted injuries	—	2	2	1	5	1	6	—	1	8	13
All other external causes	—	—	1	1	2	1	—	—	—	1	3
TOTALS	95	365	163	185	808	222	422	175	220	1,039	1,847

TABLE III — Causes of death at each age period—continued

CAUSES OF DEATH	Under 4 Weeks	4 Weeks & under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 and under 75	Over 75	All Ages
Mental disorders	1	..	2	1	6	10
Meningitis
Multiple sclerosis	1	..	1	1	..	..	3
Other diseases of nervous system, etc.	2	..	1	..	..	1	2	6	10	22
Active rheumatic fever
Chronic rheumatic heart disease	1	1	7	7	16
Hypertensive disease	5	1	3	7	10	21
Ischaemic heart disease	23	81	153	199	461
Other forms of heart disease	1	..	..	13	23	93	130
Cerebrovascular disease	2	5	26	72	167	272
Other diseases of circulatory system	1	2	5	4	23	70	105
Influenza	1	..	..	1	4	9	15
Pneumonia ..	1	6	..	..	2	..	3	4	9	28	87	140
Bronchitis, emphysema	1	6	20	20	47
Asthma	2	..	..	..	2
Other diseases of the respiratory system	2	..	1	..	..	2	2	2	6	13
Peptic ulcer	2	1	1	7	11
Appendicitis
Intestinal obstruction and hernia ..	1	..	..	..	..	..	..	1	1	1	2	6
Cirrhosis of liver	1	1	3	2	..	6
Other diseases of digestive system	1	1	2	7	6	17
Nephritis and nephrosis	5	2	7
Hyperplasia of prostate	1	..	2	3	3	3
Other diseases of the genito-urinary system	12	12	18
Abortion
Other complications of pregnancy, etc.
Diseases of the skin and subcutaneous tissue
Diseases of the musculoskeletal system	1	..	1	1	1	4
Congenital anomalies ..	3	2	5	1	..	..	..	..	..	..	..	11
Birth injury, difficult labour, etc. ..	13	..	..	..	..	..	..	..	..	..	..	13
Other causes of perinatal mortality ..	10	2	..	..	..	..	..	..	..	..	..	10
Symptoms and ill-defined conditions	7	9	4	1	5	4	13	15
Motor vehicle accidents	1	1	..	4	1	3	3	7	3	33
All other accidents..	6	1	2	1	2	..	1	28
Suicide and self-inflicted injuries	13
All other external causes	2	..	1	..	3
ALL CAUSES ..	28	13	8	4	19	23	32	101	264	494	861	1,847

Part II - Epidemiology

Notifiable Diseases

The diseases now to be notified to the Medical Officers of Health of District, Borough and County Borough Councils are:—

Acute encephalitis	Ophthalmia neonatorum
Acute meningitis	Paratyphoid fever
Acute poliomyelitis	Scarlet fever
Amoebic dysentery	Tetanus
Anthrax	Tuberculosis
Bacillary dysentery	Typhoid fever
Diphtheria	Whooping Cough
Food Poisoning	Yellow fever
Infective jaundice	Cholera
Leprosy	Plague
Leptospirosis	Relapsing Fever
Malaria	Smallpox
Measles	Typhus

Notification of the diseases given below is no longer required:—

Acute influenzal pneumonia	Erysipelas
Acute primary pneumonia	Membranous croup
Acute rheumatism	Puerperal pyrexia

The responsibility for notifying a case or suspected cases of food poisoning or infectious disease now rests exclusively on the medical practitioner attending the patient unless he believes that another practitioner has already notified the case.

Three hundred and thirty-four cases of infectious and other notifiable diseases (excluding tuberculosis) were notified to the District Medical Officers of Health during 1972. Particulars of these cases and their distribution appear in Table IV on page 25 of this report.

TABLE IV—DISTRIBUTION OF NOTIFIED CASES OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES
IN RURAL AND URBAN DISTRICTS 1972
(including Non-Civilians)

Sanitary District	Total No. Notified	Scarlet Fever	Measles	Whooping Cough	Acute Meningitis	Dysentery	Paratyphoid Fever	Acute Encephalitis	Post Infectious	Food Poisoning	Ophthalmia Neonatorum	Infective Jaundice
Bourne U.D.	12 (79)	6	6	—	—	—	—	—	—	—	—	—
Grantham M.B.	55 (309)	7	30	4	5	1	—	—	—	—	—	8
Sleaford U.D.	59 (77)	3	45	2	2	—	—	—	—	6	1	—
Stamford M.B.	22 (43)	3	15	2	—	2	—	—	—	—	—	—
Aggregate of Urban Districts	148 (508)	19	96	8	7	3	—	—	—	6	1	8
E. Kesteven R.D.	57 (234)	5	33	3	4	—	—	—	—	9	—	3
N. Kesteven R.D.	70 (286)	2	49	—	3	5	1	—	1	3	—	6
S. Kesteven R.D.	28 (108)	6	21	—	—	1	—	—	—	—	—	—
W. Kesteven R.D.	31 (73)	7	21	—	—	1	—	—	—	—	—	2
Aggregate of Rural Districts	186 (701)	20	124	3	7	7	1	—	1	12	—	11
Totals for Whole County	334 (1,209)	39	220	11	14	10	1	—	1	18	1	19

Note: Figures in brackets relate to 1971

TUBERCULOSIS

The following table gives details of the movement of cases on and off the Register during the year, and the state of the Register at the 31st December, 1972:—

	Respiratory		Non-Respiratory		Total	
	M	F	M	F	M	F
No. of persons on Register at 31.12.71	174	127	18	29	192	156
<i>Cases added to Register during 1972</i>						
Formally notified	8	5	2	2	10	7
Transferred from other areas	2	1	—	—	2	1
	184	133	20	31	204	164
<i>Cases removed from Register during 1972</i>						
Died	8	1	—	—	8	1
Removed from area	1	—	—	—	1	—
Recovered	6	5	1	—	7	5
No. of persons on Register at 31.12.72	169	127	19	31	188	158

The age groups of cases placed on the Register and of persons who died from tuberculosis during 1972 are as follows:—

Age Groups	Cases placed on Register				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
Under 1 year	—	—	—	—	—	—	—	—
1—4 years	—	—	—	—	—	—	—	—
5—14 years	—	—	—	1	—	—	—	—
15—24 years	2 (1)	—	—	—	—	—	—	—
25—44 years	2	1 (1)	1	—	—	—	—	—
45—64 years	4	4	1	—	—	—	—	—
65—74 years	1	1	—	1	—	—	1	—
75 and over	1 (1)	—	—	—	2	—	—	—
TOTAL	10 (2)	6 (1)	2	2	2	—	1	—

N.B. Cases transferred from other authorities are included in the main figures and also shown separately in brackets.

The following table shows new cases (including inward transfers) coming to the notice of the County Health Department during the last five years:—

Year	Respiratory	Non-Respiratory	Total
1968	15	1	16
1969	19	4	23
1970	13	3	16
1971	8	6	14
1972	16	4	20

The three deaths from tuberculosis represent a mortality rate of 0.02 per thousand of the total population. Comparative information relating to the deaths from tuberculosis during the last decennium is given below:—

	Respiratory Tuberculosis		Non-Respiratory Tuberculosis	
	No. of Deaths	Death Rate	No. of Deaths	Death Rate
1963	7	0.05	2	0.01
1964	3	0.03	—	0.00
1965	3	0.02	—	0.00
1966	4	0.03	—	0.00
1967	2	0.01	—	0.00
1968	5	0.03	1	0.01
1969	4	0.03	—	0.00
1970	3	0.02	—	0.00
1971	3	0.02	1	0.01
1972	2	0.01	1	0.01

It was not necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from respiratory tuberculosis, employed in the milk trade), or under Section 172 of the Public Health Act, 1936, (relating to the compulsory removal to hospital of persons suffering from tuberculosis).

Reference is made to the services provided for the welfare of tuberculous patients in the section dealing with the County Council's Scheme for the Prevention of Illness, Care and After-Care on page 47.

During the year under review new cases were seen at the Lincoln Chest Clinic by Dr. J. B. Wilkinson and Dr. Mithal. The cases referred were mainly from General Practitioners practising in the area of the Lincoln, Lindsey and Kesteven local health authorities and from a total of 851 new cases seen, 309 were found to have some abnormality. Among those found to have an abnormality, 31 % had asthma, 20 % Carcinoma of Lung, 20 % Chronic Bronchitis and Emphysema, 11 % Tuberculosis, 8 % Pneumonia and 10 % other chest diseases including Bronchiectasis, Hay Fever and Cardiac Failure.

The Clinic at Grantham which caters mainly for Kesteven cases but does also have some referred from the Leicestershire and Nottinghamshire areas produced 86 cases with some form of abnormality from a total of 196 new cases seen. Of the abnormal cases 26 % had Asthma, 24 % Carcinoma of Lung, 20 % Chronic Bronchitis and Emphysema, 17 % Tuberculosis and 13 % other diseases of the Chest.

Very few patients were referred to the anti-smoking clinic during the year,

Venereal Diseases

There was a small decrease in the number of patients diagnosed as suffering from venereal disease attending at the special treatment centres at hospitals in the area.

The following table compiled from returns submitted by the physicians in charge of the special treatment centres in this area shows the number of Kesteven patients who attended for the first time during 1972:—

	Syphilis	Gonorrhoea	Other Conditions	Other Genital Infections	Total No. of Attenders
Nottingham ..	—	3	9	4	16
Grantham ..	—	6	16	41	63
Lincoln ..	1	14	34	39	88
Peterborough ..	1	6	19	59	85
Boston ..	—	1	1	—	2
TOTAL ..	2	30	79	143	254

The numbers of persons seen at the clinics serving the area in each of the last ten years were as follows:—

1963	1964	1965	1966	1967	1968	1969	1970	1971	1972
103	109	126	100	145	122	176	240	260	254

Following the receipt of Circular 38/68 from the Ministry of Health regarding the control of venereal disease, a meeting was held which was attended by all the Medical Officers of Health of local health authorities and the consultant venereologist for the area. The consultant venereologist considered that his present methods of contact tracing were satisfactory to him.

It was agreed that the existing arrangements should continue and that if the consultant venereologist wished for help in contact tracing, he would get in touch with the appropriate Medical Officer of Health to seek the services of a health visitor or community nurse.

A film about venereal disease entitled “Quarter of a Million Teenagers” has been purchased by the Education Committee and has been made available for showing to adult and student audiences.

Part III - Vaccination and Immunisation

Smallpox Vaccination

The Council's scheme for vaccination against smallpox continued during 1972 having regard to the information contained in Circular CMO 12/71 dated 28th July, 1971 received from the Department of Health and Social Security which informed local health authorities of the views held by the Joint Committee on Vaccination and Immunisation. The Committee considered that the risk of exposure to smallpox in Great Britain was so small that although the number of serious complications occurring after smallpox vaccination in children was very small, it was not now necessary to recommend vaccination against smallpox as a routine procedure in early childhood. The Committee did, however, emphasise that all travellers to and from areas of the world where smallpox is endemic or countries where eradication programmes are in progress should be protected by recent vaccination.

During the year 160 children under the age of 16 were vaccinated against smallpox and 106 children were re-vaccinated.

Diphtheria, Whooping Cough and Tetanus Immunisation

The scheme for diphtheria immunisation continued as outlined in the Annual Report for 1961 when the use of combined antigens was introduced. The following table gives details of Diphtheria, Whooping Cough and Tetanus immunisation given to children during 1972:-

	Primary Course Children born in years						Total	Rein- forcing Injec- tions
	1972	1971	1970	1969	1965- 1968	Others under age 16		
Diphtheria	—	—	—	—	1	—	1	10
Diphtheria/ Whooping Cough	—	—	—	—	—	—	—	—
Diphtheria/ Tetanus	—	7	6	5	27	20	65	2,921
Diphtheria/ Whooping Cough/ Tetanus	124	1,579	515	29	26	3	2,276	180
Diphtheria/ Whooping Cough/ Tetanus/Polio	—	—	—	—	—	—	—	—
Whooping Cough/ Tetanus	—	—	—	1	2	70	73	331
TOTAL	124	1,586	521	35	56	93	2,415 (2,364)	3,442 (3,969)

Poliomyelitis Vaccination

There were no changes in the scheme for poliomyelitis vaccination during 1972. The following table shows the number of children under 16 years of age who received protection against poliomyelitis in 1972:—

Poliomyelitis Vaccination	Children born in years					Others under age 16	Total
	1972	1971	1970	1969	1965– 1968		
Primary Course	106	1,609	530	44	64	25	2,378 (2,305)
Re-inforcing Doses	—	10	20	7	2,001	472	2,510 (2,893)

Vaccination against Anthrax

Vaccination against anthrax is now carried out as required at two establishments in the County where the employees are considered to run a risk of contracting the disease from materials handled.

Vaccination against Measles

There were no changes in the scheme for measles vaccination during 1972.

The following table shows the number of children who were vaccinated against measles during the year:—

Children born in years						Others under age 16	Total
1972	1971	1970	1969	1965– 1968			
6	652	552	109	158		16	1,493 (1,678)

Vaccination against Rubella (German Measles)

The scheme for the vaccination against rubella of girls aged 11–14 years was continued. The high rate of vaccination was maintained by offering vaccination to girls in their second year at secondary schools and by the end of the year 813 girls had been protected.

B.C.G. Vaccination

The vaccination against tuberculosis of children aged 13 years and over and students was continued.

A total of 2,079 children and students was skin tested during 1972.

		Positive	Negative	Vaccinated
Schoolchildren and Students	..	156	1,807	1,782

In addition, the vaccination with B.C.G. vaccine of children who were close contacts of known cases of tuberculosis and negative to the tuberculin skin test was undertaken by the chest physicians as part of the clinical service to the patients and contacts.

During 1972 39 children were skin tested by the chest physicians and of these 37 gave a negative reaction.

A total of 71 children was vaccinated, and of this total there were 27 infants who received vaccination without first being skin tested.

Part IV - Care of Mothers and Young Children

Infant Welfare Centres

The total number of centres maintained by the County Council at the end of 1972 was 56. Most of the centres are run with the help of voluntary committees, and I would again like to thank on behalf of the County Council all members of the voluntary committees and their helpers for the valuable service they render to the mothers and young children of the county.

Total Attendances:	Children born in 1972	..	..	18,574
	Children born in 1971	..	..	17,769
	Children born 1967 to 1970	..	..	10,232
				<hr/> 46,575

Number of individual children who attended:

Born in 1972	..	..	..	2,198
Born in 1971	..	..	..	2,117
Born 1967 to 1970	..	..	..	1,791
				<hr/> 6,106

Number of Consultations with medical staff: 8,405

Comparative figures for the last five years are given below:—

Year	Individual Children who attended I.W.C.s	Total Attendances	Consultations with M.O.
1968	5,498	44,005	9,405
1969	5,797	45,311	8,490
1970	5,892	47,991	7,578
1971	5,845	48,672	8,654
1972	6,106	46,575	8,405

In addition there are seven unofficial centres, four in villages and three at Royal Air Force stations. These centres are organised on an informal basis by district nurses and other interested persons, and 1,225 attendances were recorded during 1972.

Ante and Post Natal Clinics

Ante and post-natal clinics are held at the general practitioners' surgeries with the district midwife in attendance. Where it is difficult for expectant mothers to attend surgeries the district midwife is usually able to help by providing transport. In the more isolated areas the ante-natal examination may take place at home, the doctor being accompanied by the district midwife. Post-natal clinics are also held at doctors' surgeries with the district midwife in attendance.

Expectant mothers in the North Hykeham area who desire a home confinement may book the services of a midwife at the Church Hall, Moor Lane, North Hykeham, on any Monday from 2 to 3 p.m.

Hospital Provision for Mothers and Children

Reports on the circumstances of 283 expectant mothers referred for maternity beds on social grounds were submitted to the hospital authorities.

Premature Infants

During the year there were 141 live births assignable to this county of infants notified as weighing $5\frac{1}{2}$ lbs. or less at birth. Of this total, 132 were born in hospital and nine were born at home or in a nursing home. Twenty-three premature babies died during the first few days of life.

There were 21 premature stillbirths during the year, all of which occurred in hospitals.

Further details relating to premature infants are given in Table V on page 36.

Family Planning

The County Council continued to grant free use of the accommodation at the county clinics in Grantham and Stamford to the Family Planning Association, where clinics are held as follows:

Beaconfield Clinic, Sandon Road, Grantham –

3 sessions per month

Barn Hill Clinic, Stamford –

6–8 sessions per month

The County Council opened a Family Planning Clinic at Riversdale House, Westgate, Sleaford, in June 1971. This clinic is held on the second and fourth Wednesday each month.

The County Council make per capita payments to the Family Planning Association in respect of Kesteven residents who attend at the Grantham, Stamford, Lincoln, Boston, Horncastle and Peterborough clinics run by the Family Planning Association.

Dental Care

The staff of the School Dental Service devote a certain amount of their time to the treatment of pre-schoolchildren and expectant and nursing mothers. Patients are usually seen as a result of referrals by medical practitioners, health visitors and district nurses.

Two hundred and three children were inspected during the year and 94 of them were found to be in need of treatment. Ninety-two were referred for treatment.

Seventy-five children were treated, making a total of 95 visits. Three children received second courses of treatment. Provision of treatment for the children included 48 fillings and 74 extractions, the latter being undertaken under general anaesthesia.

Twenty-seven mothers were inspected and nineteen were found to require treatment, and all received it, making a total of 52 visits to the clinics. Forty-seven fillings were completed and 9 extractions. It was not necessary to supply dentures to any of these patients.

CONSULTANT SERVICES

Some pre-school children were seen at the ophthalmic, orthopaedic and ear, nose and throat clinics held at the authority's premises at Grantham, Stamford, Sleaford and Bourne. Some pre-school children in the northern part of the County requiring ophthalmic treatment attended the special clinic for children at Lincoln County Hospital.

Ophthalmic

Clinic	Errors of Refraction		Other Eye Defects		Glasses Prescribed	
	New Cases	Re-Inspections	New Cases	Re-Inspections	New Cases	Re-Inspections
Grantham	65	162	18	36	15	36
Stamford	—	—	—	—	—	—
Sleaford	40	114	6	19	8	13
Bourne	2	—	—	3	—	—
Lincoln	25	42	1	—	4	5
Totals	132	318	25	58	27	54

Orthopaedic

The Council's physiotherapists gave treatment to 75 pre-school children, who made 740 attendances.

Speech Therapy

The Council's speech therapists gave treatment to 35 pre-school children, who made a total of 627 attendances.

Phenylketonuria

Babies born in the County were tested for phenylketonuria by the Guthrie Blood Test method and/or Phenistix Urine Test method. No positive reactions were reported.

Congenital Abnormalities

The scheme for reporting congenital defects observed at birth operated satisfactorily. The birth notification cards provide for the requisite information to be inserted by midwives or doctors when notifying births.

Details relating to 54 babies were sent to the Registrar General. The total number of defects reported was 63, nine of the babies having more than one defect. The broad classification of the reported defects was as follows:—

Central Nervous System	..	..	..	17
Alimentary System	..	..	..	8
Heart and great vessels	..	..	..	3
Uro-genital system	..	..	..	5
Limbs	..	..	..	23
Other parts of Musculo-Skeletal system			..	3
Other systems	..	..	..	1
Other malformations	..	..	..	3
				—
				63
				—

Provision of Maternity Outfits

Maternity outfits are purchased centrally and supplied to all the Council's domiciliary midwives for free distribution as required.

Mothercraft and Relaxation Classes

Weekly mothercraft and relaxation classes were held in seven of the main centres of population. Details of attendances at these classes compared with those for the previous year (given in brackets) are as follows:—

	Mothers attending		Attendances	
Bourne	53 (48)	411 (310)
Grantham	119 (106)	420 (524)
Lincoln Brant Road	37 (30)	432 (357)
Market Deeping	29 (53)	306 (349)
North Hykeham	22 (11)	161 (32)
Sleaford	65 (87)	449 (589)
Stamford	89 (89)	637 (617)
			—	—
			414 (424)	2,816 (2,778)
			—	—

TABLE V — *PREMATURE INFANTS BORN DURING 1972

PREMATURE LIVE BIRTHS

	Born at Home or in a Nursing Home										PREMATURE STILLBIRTHS	
	Born in Hospital					Nursed entirely at home or in a Nursing Home						
	Died		In 7 and under 28 days		Total Births	Died		In 7 and under 28 days		Total Births		
Within 24 hours of birth	In 1 and under 7 days	Within 24 hours of birth	In 1 and under 7 days	Within 24 hours of birth		In 1 and under 7 days	Within 24 hours of birth	In 1 and under 7 days				
2 lb. 3 oz. or less	4	4	—	—	—	—	—	—	—	—	1	—
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	11	4	2	—	—	—	—	—	—	—	8	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	29	4	—	—	1	—	—	1	—	—	5	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	27	1	—	—	—	—	—	—	2	—	4	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	61	1	1	1	6	4	—	—	—	—	3	—
TOTAL	132	14	3	1	7	4	—	1	2	—	21	—
36												

*i.e. babies weighing 5½ lbs. or less at birth irrespective of period of gestation.

Welfare Foods Service

A further centre distributing Welfare Foods was opened in the village of Dorrington in December, 1972, thus bringing the total number of distributing centres up to 63.

In my report of 1971, mention was made that the two products cod liver oil and orange juice were discontinued as Welfare Foods, and that both were replaced by the one product Children's Vitamin Drops. Existing stocks of cod liver oil continued to be sold until June, 1972 at which date the Department of Health & Social Security instructed that the remaining stocks be withdrawn, it being considered that owing to the age of the oil, no further sales should be made. Sales of Orange Juice are to continue until stocks are exhausted; at the end of 1972 only eight centres held stocks of Orange Juice and the total of these was 542 bottles.

In the first quarter of 1972 the tablet Vitamin 'C' was introduced to be issued together with the tablet Vitamin 'A & D' for the benefit of expectant mothers. This was an interim measure until such time as the three vitamins could be included in one tablet. The new tablet containing Vitamins A. D. and C. is now obtainable and is being made available at distributing centres for issue to beneficiaries.

The following table shows the quantities of Welfare Foods issued to beneficiaries during the year:

Year	National Dried Milk (Cartons)	Cod Liver Oil (Bottles)	Vitamin Tabs. A, D & C (Packets)	Vitamin Tabs. A & D (Packets)	Vitamin Drops (Bottles)	Orange Juice (Bottles)
1971	4,037	800	Nil	2,086	2,953	39,879
1972	2,899	91	1,462	Nil	5,847	17,901

The Department of Health and Social Security's two leaflets 'Your right to free Welfare Milk and Vitamins' and 'New Children's Vitamin Drops' are both freely available to the public at all distributing centres where posters drawing attention to these are prominently displayed.

Part V — Nursing Service

HEALTH VISITING

Staff

During the year, one health visitor was appointed to the post of Area Nursing Officer and three resigned, whilst three full-time and one part-time appointments were made. At the 31st December 1972, nine whole-time and one part-time health visitors were in post.

Twenty-one members of the district nurse/midwifery staff continued to undertake health visiting as part of their combined duties and certain routine duties were undertaken by temporary nursing staff.

The following statistics relate to the home visiting undertaken by the health visiting staff during 1972, with comparative figures for 1971 given in brackets. Ineffective visits have been excluded.

			First Visits	Total Visits
Children born in 1972	..	..	2,930 (2,895)	9,741 (8,483)
Children born 1967 to 1971	..	..	7,392 (5,680)	17,908 (16,148)
Persons aged 5 to 16	..	..	133 (—)	307 (—)
Persons aged 17 to 24	..	..	456 (—)	1,477 (—)
Persons aged 65 and over	..	..	1,327 (872)	6,839 (5,117)
*Expectant Mothers	..	..	262 (237)	468 (403)
Tuberculous households	..	..	56 (60)	195 (182)
Other cases	..	..	406 (251)	975 (1,013)
				<hr/>
				37,910 (31,346)

* Excluding visits by District Nurse/Midwife/Health Visitors.

Health visitors were also in attendance at infant welfare centres and clinics, details of which appear in other sections of this Report.

MIDWIFERY

The number of midwives who gave notice of intention to practice in the Authority's area during the year 1972 was 137 of whom:—

48 were domiciliary midwives employed by the County Council;

88 were employed by Hospital Management Committees;

1 was employed privately.

At the end of the year, 43 domiciliary midwives were employed by the County Council.

The following are details of cases attended during the year:

Midwives	Domiciliary Cases	Cases in Institutions	Total
(1) Employed by County Council	130	—	130
(2) Employed by Hospital Management Committees	—	2,094	2,094
TOTALS	130	2,094	2,224

The total number of confinements attended by midwives in the County, 2,224, was lower than that for 1971 (2,428) and 1970 (2,519) and also lower than the average for the years 1968–72 (2,493). The proportion of hospital confinements, 94.2 %, showed an increase of 2.1 % on that for 1971. The figure for 1970, was 84.3 % and for 1969 86.5 %.

Due to the large number of hospital confinements which took place during the year, there was again an increase in the number of cases discharged home before the end of the minimum lying-in period of ten days. The total number of early discharges during 1972 was 1,958, compared with 1,770 in 1971, 1,653 in 1970, 1,592 in 1969 and 1,326 in 1968.

The total number of visits paid to all maternity cases during 1972 amounted to 10,845 plus 2,737 ante-natal visits – a total of 13,582, compared with 14,482 (11,318 plus 3,164 ante-natal visits) in 1971 and 17,497 (12,757 plus 4,740 ante-natal visits) in 1970. Miscarriages attended during the year 1972 numbered 34, compared with 29 in 1971 and 47 in 1970.

The number of cases in which medical aid was summoned by midwives under Section 14(1) of the Midwives Act, 1951, totalled 22 – all domiciliary.

Analgesia

The extent to which one or other of the various forms of analgesia was administered during 1972 by the midwife or doctor in attendance at domiciliary confinements was as follows:–

Entonox	Trilene	Pethedine
38	31	64

Refresher Courses for Midwives

During the year eight midwives employed by the County Council, together with one area nursing officer, attended approved refresher courses in accordance with the rules of the Central Midwives Board.

HOME NURSING

During the year 1972, 3,656 persons received 70,156 visits, compared with 3,094 persons and 61,760 visits in 1971 and 2,940 persons and 59,739 visits in 1970.

The number of persons aged 65 years and over who were attended during the year totalled 2,099 – 57% of all cases attended. Visits to the aged amounted to 50,322 – 72% of all visits paid by nurses.

An analysis of the work undertaken by the district nurses during the year 1972 (with comparative figures for the previous year given in brackets) is as follows:–

Place where first treated	No. of Persons	No. of Visits
Patient's Home	3,590	69,753
G.P.'s Premises	17	24
M. & C.W. Centre	2	12
Residential Homes	35	325
Elsewhere	12	42
TOTALS	3,656	70,156

GENERAL

Staff

During the year, the following appointments and resignations were made:–

Appointments

- 2 District Nurse/Midwives with combined duties.
- 6 District Nurse/Midwives (including 1 temporary).

Resignations

- 5 District Nurse/Midwives.
- 1 District Nurse/Midwife with combined duties.
- 1 Temporary District Nurse.

At the 31st December, 1972, actual staff employed was as follows:–

- 19 District Nurse/Midwives with combined duties.
- 27 District Nurse/Midwives.
- 6 District Nurses.

When Bourne Health Centre opened the opportunity was taken to attach nursing staff working from the Centre to general practitioners. Throughout the County the nursing staff work very closely with the general practitioners and I think it would be fair to say that, in many cases, there is attachment in effect, if not in name.

An arrangement has been made with the Lincoln County Hospital by which our health visitors visit Kesteven mothers to give them information about the services available to them after they are discharged from hospital.

Housing

At the 31st December, 1972, the County Council owned 12 houses, all of which had been especially built for the nursing and midwifery staff.

Transport

The County Council agreed to the purchase of four new cars during the financial year 1972/73, subject to the trading-in in part exchange of four existing cars then surplus to requirements.

At the 31st December, 1972 the total number of cars used by the nursing service was as follows:—

Owned by the County Council	..	..	27
Owned by District Nurses and Midwives	..	..	33
			—
	Total	..	60
			—

Disposable Incontinence Pads, Pants and Equipment

Incontinence pads and pants are supplied to patients free of charge through the home nursing service.

Sterile disposable syringes and needles, face masks and gloves, which are purchased centrally, are supplied to the Council's nurses and midwives through convenient distribution points.

Marie Curie Memorial Foundation

Six patients received assistance during the year 1972 through the Area Welfare Grant Scheme.

Nursing Homes

At the end of the year there were two nursing homes registered in the County. These homes provide 46 beds for general cases. The Director of Nursing Services made visits of inspection to these homes during the year.

Part VI - Ambulance Service

Once again I have to report an extremely active year on the part of the Ambulance Service and what appears to be an inevitable increase in demand on the service and work performed. The number of patients carried during 1972 increased by 12,036 (i.e. from 112,506 to 124,542) and the annual mileage of 1,138,020 represents an increase of 81,487 miles over the previous year. The average miles per patient carried reflects a slight decrease at 9.13 as against 9.3 for the previous year.

Accident and emergency cases conveyed during the year totalled 5,587. Of these 909 were road accident casualties and 4,678 other emergency cases of all types. Turn outs in response to emergency calls numbered 5,296 of which number 191 were abortive, the ambulance not being required on arrival at the site of the incident.

During the year the hospital car service carried 33,213 patients over a distance of 373,528 miles compared with 27,654 patients and a mileage of 329,575 during 1971. This substantial increase is mainly due to the increased demand for the transportation of cases to Training Centres and Special Schools, and for out patient transport to distant hospitals. Without the assistance of the enrolled drivers the ambulance service would be unable to meet all its commitments and I must once again pay tribute to the members of this service for their help and co-operation.

A detailed summary of the work carried out during the year appears on page 44.

VEHICLES

The approved vehicle establishment of 31 vehicles remained unchanged throughout the year, the actual availability being restricted to 30 due to long delays in the delivery of additional and replacement vehicles. The distribution of the fleet as at the 31st December, 1972 was as follows:

Station	Large DP Ambulance	Small DP Ambulance	DP Sitting Case Vehicle	Sitting-case Car	Total Vehicles
Grantham	3	2	2	—	7
Sleaford	3	1	2	1	7
Waddington	2	2	—	—	4
Stamford	3	1	1	—	5
Bourne	2	2	—	—	4

Plus three 2nd line D.P. Ambulances maintained as reserve vehicles.

In accordance with County Council policy, the majority of the maintenance and repair work continued to be carried out by the staff of the County Council Central Repair Depot at Grantham and I should once again like to express my thanks to the Depot Officer and his staff for their willing help and assistance.

STAFF—OPERATIONAL

(A) Officers

The complement of whole time officers as at 31st December, 1972 was as follows:

Station	Station Officers	Sub Officers	Snr. Control Officers	Assistant Control Officers	Total
Sleaford	1	1	1	5	8
Grantham	1	—	—	—	1
Bourne	—	1	—	—	1
Stamford	1	—	—	—	1
Waddington	1	—	—	—	1

(B) Ambulancemen/Women (Whole time)

The establishment of whole time personnel in this category comprises 58, of which 55 personnel were in post at the 31st December, 1972. This distribution of personnel at Stations throughout the County was as follows:—

Station	Whole time Personnel	
	Shift Work	Day work
Grantham	12	2
Sleaford	12	2
Waddington	9	2
Stamford	9	2
Bourne	—	5
TOTAL	42	13

TRAINING

Secondment of personnel to residential training courses for Ministry of Health Basic Ambulance six week courses and Ambulance Aid two week courses continued throughout the year, as did local training. It was also possible to commence two week residential refresher courses for qualified personnel and in-service training in hospital as recommended by the Department, the latter being on a limited basis.

At the end of the year the overall position regarding qualification for the Ambulance Service Advisory Council Proficiency Certificate was as follows in respect of the 61 personnel required to hold the award.

Qualified for Certificate – 58

Awaiting six week Basic Ambulance Course – 3

Places on courses have been arranged to ensure that the three personnel awaiting courses will attend early in 1973.

STATISTICS FOR THE YEAR 1972

Station	Ambulances		Sitting-case Vehicles		Totals	
	Miles	Patients	Miles	Patients	Miles	Patients
Sleaford	198,822	23,715	33,614	3,135	232,436	26,850
Grantham	161,144	18,723	35,794	2,607	196,938	21,330
Bourne	100,457	11,083	—	—	100,457	11,083
Stamford						
K.C.C.	62,402	9,764	16,875	1,137	79,277	10,901
Stamford						
Agency	32,563	3,845	6,102	661	38,665	4,506
Waddington	116,719	16,659	—	—	116,719	16,659
Hospital Car						
Service	—	—	373,528	33,213	373,528	33,213
TOTALS	672,107	83,789	465,913	40,753	1,138,020	124,542

Average Miles per patient – 9.13

OTHER DIRECTLY PROVIDED TRANSPORT

					Miles	Patients
Physically Handicapped Vehicle	..	..			13,319	9,599
Blind Persons Vehicle	..	..	..		17,293	7,577
Social Services Vehicle	..	..	..		10,280	7,797
Education Vehicle	..	..	..	..	27,039	2,972
					Miles	Journeys
Staff Car	..	..	..	..	10,882	164

Annual Reports of the County Medical Officer of Health &
Principal School Medical Officer 1972 -

CORRECTION

P.45 Chiropody

Line 3 should read:

"increased to 71 by the formation of 4 new clubs".



Part VII - Prevention of Illness, Care & After Care

Health Education

Our medical, dental and nursing staff continued to meet the demand for talks on a variety of subjects. Films on childbirth, cervical cytology and family planning methods were shown to interested women's organisations.

The Family Doctor publication "You and Your Baby" was freely available to all mothers attending at clinics and infant welfare centres.

The County Council again made financial contributions to the Health Education Council and the Royal Society for the Prevention of Accidents.

There was a continued demand for talks, information and films on drugs, smoking and venereal diseases.

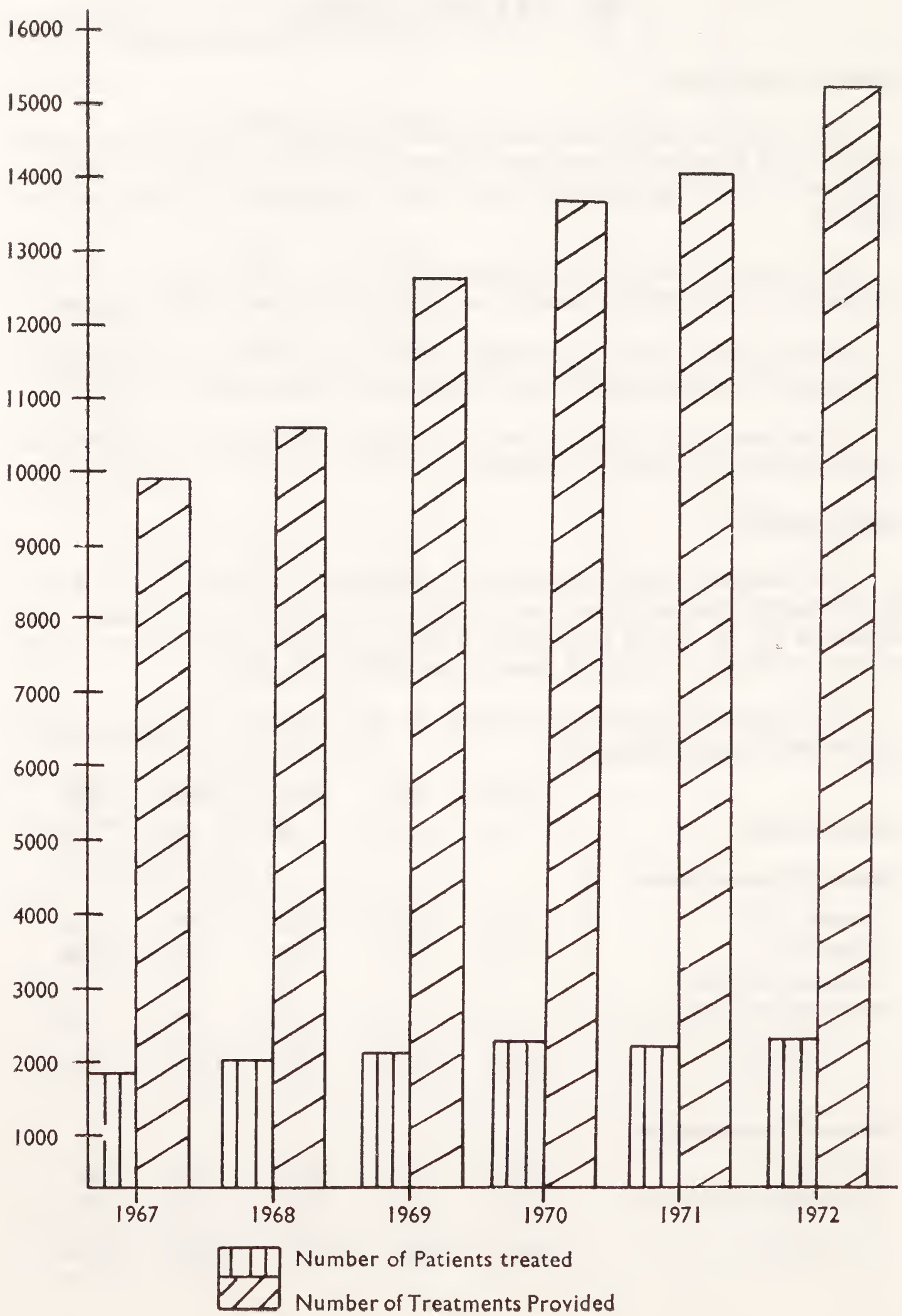
Chiropody

The number of clubs which offer a chiropody service to the O.A.P.s, the Physically Handicapped and to expectant mothers in the County was increased by 71 by the formation of four new clubs. These were in the villages of Welby, Allington, Baston and South Rauceby.

The following figures give details of the numbers of clubs, persons treated and treatments given:—

			1972	1971	1970	1969	1968
Number of Clubs	..	..	71	67	66	63	57
Number of Persons Treated:							
Women of 60+	..	..	1,339	1,258	1,367	1,291	1,202
Men of 65+	..	..	410	377	366	355	319
Expectant Mothers	..	..	1	—	3	1	—
Physically Handicapped	..	..	43	68	93	97	75
TOTAL	..	..	<u>1,793</u>	<u>1,703</u>	<u>1,829</u>	<u>1,744</u>	<u>1,596</u>
Number of Treatments given:							
In Clinics	..	..	8,042	7,188	6,685	6,500	5,867
In Patients' Own Homes	..	..	<u>4,140</u>	<u>4,175</u>	<u>3,901</u>	<u>3,627</u>	<u>3,291</u>
TOTAL	..	..	<u>12,182</u>	<u>11,363</u>	<u>10,586</u>	<u>10,127</u>	<u>9,158</u>

DEVELOPMENT OF THE CHIROPODY SERVICE



A Chiropody service provided directly by the County Council continued at Beaconfield Clinic, Grantham. During 1972 a total number of 194 persons attended for treatment, these received a total number of 1,018 treatments.

Tuberculosis

The close co-operation which has been built up during the years with the chest clinics serving the County has again been maintained. Free milk was supplied on the recommendation of the chest physician to six persons suffering from tuberculosis.

Tuberculous patients being nursed at home received assistance from the County Council's Home Help Service. Home helps who may be required to undertake work with families where tuberculosis is known to be present in the household are x-rayed by arrangement with the chest physicians.

Tuberculosis Vaccines Clinical Trial

Local health authorities help in this trial by making quarterly returns to the Tuberculosis Research Unit of the Medical Research Council of all cases of tuberculosis notified, and cases discovered only after death, in persons born in the years 1935 to 1938 inclusive. No cases were notified to the Unit during 1972.

Long Stay Immigrants

Fifty-six long stay immigrants, including twenty-six children, gave addresses in this county on their arrival in the country during 1972, and members of the health visiting staff succeeded in contacting fifty cases.

Cervical Cytology

Sessions for the taking of cervical smears are held weekly in the County Council's clinic at Grantham and fortnightly at the Sleaford and Stamford clinics. By arrangement with the Lincoln Health Department women resident in the northern part of Kesteven are seen at the Lincoln clinic. The total number of smears from women resident in Kesteven sent for examination from our own clinics and the Lincoln clinic was 2,067 compared with 2,133 in 1971.

Details of attendances at the cytology clinics during the year are as follows:—

CLINIC	No. of Patients (1)	Total No. of smears (2)	No. of repeat smears taken included in (2) (3)	No. of Positives (4)
Beaconfield, GRANTHAM	603	603	406	Nil
Riversdale, SLEAFORD	574	574	360	Nil
Barnhill, STAMFORD	298	470	216	1
TOTALS	1,475	1,647	982	1

In addition 420 smears were taken at the Lincoln clinic from women resident in the northern part of the county, with no positive readings.

Care and after-care of Patients

When requested by general practitioners, hospitals or other agencies the County Council continued to assist under their scheme patients being nursed at home or after discharge from hospital.

The close liaison between the Health Department's staff and the hospital staff continued during the year. The arrangements at local level for direct contact between hospital staffs and the district home help supervisors, health visitors and nurse/midwives and mental welfare officers continued to operate satisfactorily.

Nursing Equipment and Apparatus

There were no changes in the Council's arrangements as outlined in previous reports. Each district nurse has an ample stock of the smaller items of loan equipment, while the British Red Cross Society and the St. John Ambulance Brigade who administer the Medical Loan Depots on behalf of the County Council have, with the aid of grants from the County Council, continued to maintain their own comprehensive stocks of articles.

Depot	No. of Issues Made	No. of Individual Cases who Benefitted
Bourne	50	50
Grantham	619	521
Stamford	327	281
Sleaford	398	180
TOTALS	1,394	1,032

Part VIII - Other Services

Development Plan

The provision of two further health centres in North Hykeham and Market Deeping areas was included in the Capital Building Programme for 1972/75, and planning for these proceeded during the year.

The provision of a two bay ambulance station at Market Deeping with provision for subsequent extension to four bays was included in the development plan.

The proposed alteration and extension of the Clinic at Barn Hill, Stamford, were deferred following an intimation from the Department of Health and Social Security that the Kesteven Executive Council had indicated that some of the general practitioners in the Stamford area might be interested in health centre facilities in the future but that the Barn Hill site was not considered suitable. This is now under consideration and an alternative site is being sought.

The Health Committee also agreed that a new health clinic at Earlsfield, Grantham, be provided to cater for this new development area.

The Department of Health and Social Security deferred the proposed extensions to Beaconfield Clinic, Grantham, for one year on the grounds that other schemes in the Country had greater priority.

Blind and Partially Sighted Persons

The table below gives details of blind and partially sighted persons on the County Council's register during the year ended 31st December, 1972:-

	(i)	(ii)
	Blind	Partially Sighted
(a) Registered at 1st January, 1972	318	91
(b) New registrations during the year	30	8
(c) De-certified cases re-registered	—	—
(d) Deaths	21	5
(e) Transfers to other areas	2	—
(f) Transfers from other areas	5	—
(g) Transfers from blind to partially sighted category included in b(ii) above ..	—	—
(h) Transfers from partially sighted to blind category included in b(i) above ..	—	—
(i) Recovered sight	—	—
(j) Registered at 31.12.1972	330	94

The age groups of the persons newly registered during the year were as follows:—

				Blind	Partially Sighted
0	—	15 years	..	—	1
16	—	59 years	..	4	1
60	—	69 years	..	3	1
70	—	79 years	..	9	2
80+		..	..	14	3
				—	—
				30	8
				—	—

The proportion of newly registered persons aged 60 years and over represents $86\frac{2}{3}\%$ of the new registrations as against 85% in the previous year.

	Causes of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(i) Number of cases registered during the year in respect of which section D1 of Form B.D.8 recommends:				
(a) No treatment	3	—	—	23
(b) Treatment (medical surgical or optical)	4	1	—	7
(ii) Number of cases at (i)(b) above which on follow-up action have received treatment	4	1	—	7

Ophthalmia Neonatorum

One case of this disease was notified in Kesteven under the Public Health (Ophthalmia Neonatorum) Regulations, 1926/37.

Part IX - Environmental Health Services

Food Hygiene (General) Regulations, 1970

Twenty-two school kitchens were inspected under the requirements of the above Regulations. One hundred and twenty-nine pounds of food supplied to County Council establishments was condemned as unfit for human consumption.

Milk (Special Designation) Regulations, 1963/65

Administration of the above Regulations is carried out by the County Council. At the end of the year there was one pasteurising dairy in the county and a total of one hundred and forty-five premises registered for the sale of pre-packed milk. During the year, eighty-one visits were made to milk dealers' premises and one hundred and fifty-one samples of milk were obtained for bacteriological examination.

Particulars of the samples taken are given in the table below:—

District in which Sample taken	No.	PASTEURISED			UNTREATED			STERIL- ISED		ULTRA HEAT TREATED	
		Passed	Failed	Void	Passed	Failed	Void	Passed	Failed	Passed	Failed
Grantham M.B.	30	28	—	—	—	—	—	—	—	2	—
Stamford M.B.	26	24	—	—	1	1	—	—	—	—	—
Sleaford U.D.	14	12	—	—	—	—	—	—	—	2	—
Bourne U.D.	9	9	—	—	—	—	—	—	—	—	—
N. Kesteven R.D.	15	2	—	—	11	—	—	—	—	2	—
S. Kesteven R.D.	26	15	—	—	6	4	—	1	—	—	—
E. Kesteven R.D.	13	9	—	—	3	—	—	1	—	—	—
W. Kesteven R.D.	18	13	—	—	3	—	—	2	—	—	—
TOTALS	151	112	—	—	24	5	—	4	—	6	—

Biological Milk Sampling

The number of Producer/Retailers in the county licensed by the Ministry of Agriculture, Fisheries and Food for the retail sale of 'Untreated' milk remained throughout the year at thirteen.

The majority of the herds involved are accredited herds under the Ministry's schemes for tuberculosis and brucellosis and are regularly tested by their staff. Routine samples of 'Untreated' milk are also taken by the County Council for biological and other examination. During the year, a total of thirty samples were examined, all of which proved to be satisfactory.

Antibiotics in Milk

Seven samples of 'Untreated' milk were submitted for the detection of antibiotics, all of which were found to be satisfactory.

Milk in Schools Scheme

At the end of the year, the number of schools receiving supplies of liquid milk was 144. Six samples of school milk submitted for examination were found to be satisfactory.

Milk and Dairies Acts and Orders

I am indebted to Mr. J. C. Hartley, the Divisional Veterinary Officer for the Ministry of Agriculture, Fisheries and Food for the following report:—

"Tuberculosis Order 1964

There are 935 attested herds in Kesteven (182 Dairy and 753 Beef), showing a drop of 94 herds over the year. 13 Dairy herds are producer retailers. Biennial tests are still carried out and no reactors were disclosed during 1972.

Brucellosis Incentive Scheme

129 Dairy herds are accredited (11 producers – retailer) and 12 are undergoing qualifying tests. The figures for Beef herds are 84 and 34 respectively. These figures reflect a steady improvement and it is pleasing to see that over 70% of the Dairy herds are in the scheme.

Anthrax

There were two positive cases of Anthrax.

Fowl Pest

13 positive cases as compared with 108 in 1971.

Swine Vesicular Disease

This disease was diagnosed for the first time in Britain in December. The outbreak was in a herd of pigs in Staffordshire and the disease spread through the West Midlands. As the disease was connected with feeding of waste foods, an intensive campaign was instituted throughout Kesteven to educate all swill feeders of the dangers in the use of waste foods."

Food and Drugs Act, 1955

The provisions of the Food and Drugs Act 1955, insofar as they relate to the chemical composition and adulteration of food and drugs are in this County administered by the Chief Weights and Measures Inspector, Mr. F. R. Cooper. I am therefore indebted to him for the following information:—

“The enforcement of standards of composition, labelling and advertising of food becomes increasingly important as our food becomes progressively more sophisticated, and the sampling programme is cast as widely as possible in order to test the truth of descriptions and to enforce standards of quality. During the year 446 samples were obtained within the area for which the County Council is the Food and Drugs Authority.

Baking Powder	1	Jelly	1
Bread & Flour	9	Malt Vinegar	1
Butter	11	Margarine	9
Butter Products	1	Marzipan	2
Cereal Products	3	Meat Products	28
Confectionery	6	Milk	208
Cheese	16	Milk Products	6
Chutney	1	Pepper	2
Coffee	4	Preserves	28
Colours & Flavours	1	Ready Meal	1
Cream	8	Salad Cream	2
Cream Products	4	Sausages	35
Curry Powder	1	Sausages (Meatless)	1
Dried Fruit	4	Soft Drinks	11
Drinking Chocolate	1	Soup	1
Drugs	3	Sweeteners	2
Fish Products	7	Syrup	1
Fruit Pies	2	Tomato Ketchup	2
Gelatine	1	Vegetable Protein Foods	3
Ice Cream	7		
Indian Brandee	1		
Intoxicating Liquor	10	TOTAL	446

In addition, 41 complaints concerning food were received from members of public, and altogether 30 articles were found to be unsatisfactory. Minor infringements were dealt with by the issuing of warnings, and these included faulty labelling, small deficiencies in standards and less serious matters concerning foreign matter in food.

Prosecutions were taken with regard to more serious cases involving poor quality food, food which fell below the required standards or which contained dangerous foreign matter. Of 13 charges, more than half related to mouldy food and it is welcome news that the Government have decided to accept the advice of the Food Standards Committee and introduce legislation which will require open date marking of food. It is hoped that this will improve communications between manufacturers, retailers and purchasers, and so help to eliminate the sale of stale and unsatisfactory food.

During the year my Department took part in the national survey to determine the extent to which pesticide residues are present in food. The results of this survey have not yet been published but the results of the previous survey have shown no alarming incidents of such residues in foodstuffs.”

Rural Water Supplies and Sewerage Acts

The following schemes were submitted to the County Council for approval:—

North Witham Sewerage Scheme
Witham on the Hill and District Sewerage Scheme
Sewerage and Pumping Scheme, South Kyme
Water Main Extension, Swarby

Water Sampling

During the year, thirty-seven samples of water supplies serving County Council premises were taken. Four of the samples were found to be unsatisfactory. These were all obtained from a supply which is shortly to be replaced with a mains water supply.

Nitrates in Water Supplies

Since 1969, the County Council have carried out sampling of water supplies in the county in order to ascertain their nitrate content. Supplies which have been found to contain relatively high levels of nitrates are frequently checked and during the year, twenty-two samples were obtained from these supplies, eleven of which gave relatively high results.

Fluoridation of Water Supplies

At the end of the year, there were three fluoridation schemes in operation supplying fluoridated water to certain areas of the county. There were also a number of other schemes in project for 1973. Routine samples of water are taken by the County Council from these supplies for examination and during the year two hundred and twenty-three samples were obtained.

National Survey of Air Pollution

The County Council operate two air pollution stations in the county at Kirkby Underwood and Ruskington. These are operated in co-operation with the Department of Trade and Industry and contain instruments for monitoring smoke and sulphur dioxide. The results obtained provide valuable information for use in both the National Survey of Air Pollution and the European Air Pollution Survey.

During the year, fifty-eight visits were made to the station at Kirkby Underwood and three hundred and five to the one at Ruskington.

Part X - School Health Service

Statistics

The population for 1972 as estimated by the Registrar General was 161,520, an increase of 1,320 compared with 1971.

The number of pupils on the school registers in January 1973 was 28,742 compared with 27,932 the previous year – an increase of 810.

Primary Schools:—

(a) Number in area on 31st December, 1972— Provided—133 Primary, 2 Nursery	135
(b) Average number of children on registers during 1972 ..	17,230
(c) Average attendance during 1972	16,078

Secondary Schools:—

(a) Number	23
(b) Average number of children on registers during 1972 ..	10,400
(c) Average attendance during 1972	9,604

Medical Inspection

The arrangements provide for full medical inspections of children as soon as possible after they enter school, in their last year at primary school and in their last year of compulsory school life.

Children attending at nursery schools (of which there are two in the County) are examined during their attendance at the schools.

Children found at the routine medical inspections to have defects requiring treatment are referred to the family doctor, or after consultation with him, to the appropriate consultant.

Colour Vision

Arrangements to test the colour vision of boys in the 10–11 age group were commenced in the county in 1966 and during 1972, 64 boys were found to have a defect of colour vision. The head teacher and family doctor as well as the parents are informed about any boy found to be suffering from such a defect so that it may be taken into account when considering his suitability for a future career.

Routine Medical Examination

The number of children seen at routine medical inspections was 7,002 (compared with 7,566 during 1971). An analysis of this figure by year of birth is as follows:—

1957 & earlier	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968 & later
827	832	64	289	1,040	1,144	54	96	333	1,271	1,032	20

In addition to the above, 5,254 other medical inspections were carried out:—

			Special Inspections	Re- Inspections	Total	
At School Clinics:—						
(a)	By School Medical Officers	..	..	846	130	976
(b)	By Ophthalmic Surgeons	..	..	372	1,824	2,196
(c)	By Orthopaedic Surgeons	..	..	221	139	360
(d)	By Ear, Nose and Throat Surgeons	..	..	82	12	94
In the Schools by School Medical Officers		..	..	81	1,547	1,628
		Totals	..	1,602	3,652	5,254

Special Examinations

A child may be brought forward by the parents, headmaster or school nurse at a routine medical inspection if it is thought he requires attention. This is called a 'Special' examination; the parent is notified and invited to be present at the examination.

Re-examinations

Children who are found to have defects are re-examined at subsequent medical inspections. When the defect does not warrant referral to a specialist or require immediate attention, the child will be kept under observation; should it later be considered necessary to advise treatment the family doctor is consulted and the school nurse visits the home to inform the mother.

General Physical Condition

The general physical condition of the children was good. Only 2 of the 7,002 examined at periodic medical inspections were considered to be of unsatisfactory physical condition.

Personal Hygiene

The school nurses carry out regular head inspections at all primary schools but only visit the secondary schools for head inspections at the request of the head teacher.

During the year a total number of 62,939 head inspections were carried out and 269 children were found to be infested.

Medical Treatment Statistics

Details of the numbers of children examined are shown in the table on page 71.

The following comparative table sets out the common defects found requiring treatment during the past five years;—

			1968	1969	1970	1971	1972
Defective Vision	..	..	598	795	621	666	581
Nose and Throat	..	..	113	113	93	96	79
Squint	..	..	82	103	98	146	140
Orthopaedic	..	..	148	161	176	182	154

Ophthalmic Clinics

There were no alterations in the arrangements with the Regional Hospital Boards for the attendance of consultants at the clinics held at Bourne, Grantham, Sleaford, Stamford and Lincoln during the year.

It is disappointing to record that a significant number of patients failed to notify the clinic that they were unable to attend the clinic.

I am grateful to Mr. S. P. Redmond for letting me have reports on the work carried out at the school ophthalmic clinics at Beaconfield, Grantham, and Riversdale, Sleaford, and also for sending me the comments of the orthoptists, Miss S. C. Turner and Mrs. Pilgrim, who work under the direction of the ophthalmic surgeons. Orthoptic clinics are a subdivision of the ophthalmic clinics and cases are referred to the orthoptists only by the ophthalmic surgeons.

Mr. Chaudhary commented on the work of the Sleaford and Grantham ophthalmic clinics :—

“During the year 1972 a total number of 1,876 cases attended the School Medical Ophthalmic Clinics at Grantham and Sleaford. 223 were new cases of over 5 years of age and 184 were new cases who were referred from the Maternity and Child Welfare Clinics. The remainder were re-examination cases. This shows a slight increase in the number of new cases and a marked increase in the re-examination cases compared with the year 1971.

“The main defects detected in children of under 5 years of age were squint, hypermetropia and blocked tear ducts as usual. Myopia was found luckily in only 8 cases of this age group.

“The main defects detected in children of over 5 years of age were hypermetropia, myopia and squint. Here again hypermetropia was more common than myopia.

“Surgery was mainly performed for squint, blocked tear ducts and Meibomian cysts. There were 28 cases of squint, over 30 cases of blocked tear ducts and about 6 cases of Meibomian cysts operated on during the year by Mr. S. P. Redmond, Consultant Ophthalmic Surgeon and by Dr. B. A. Chaudhary.

“658 pairs of glasses were prescribed during the past year for children over the age of 5 years and 72 pairs of glasses were prescribed during the same period for children of under 5 years of age.

“The clinics have had facilities for Orthoptic care and treatment and Miss S. C. Turner, Senior Orthoptist, has attended at Sleaford Clinics and her Assistants have attended at Beaconfield Clinic.”

Sleaford Orthoptic Clinic

Miss Turner comments:—

“During 1972 26 orthoptic clinics were held at Riversdale House, 21 Westgate, Sleaford. The clinics were held on Thursdays and an orthoptic student attended one clinic.

“A total of 517 patients were seen, 412 being old cases and 105 new cases. Treatment was given for varying degrees of amblyopia and most patients responded well. A number of patients had treatment to improve convergence insufficiency and this relieved their symptoms for close work.

“During the year 6 patients had operations to correct strabismus and orthoptic reports were done for pre-and post-operative measurements.

“167 appointments were not kept during the year; 59 patients notified the clinic, but the other appointments were failed without reason being given. 50 patients failed one appointment, 18 failed two appointments and 6 failed three or more times.

“116 patients were discharged having no need for further treatment or having left the area.”

Grantham Orthoptic Clinic

Mrs. Pilgrim comments:—

“The Orthoptic Clinic was held on forty-four occasions at the Beaconfield Clinic, Sandon Road, Grantham.

“One Orthoptist worked every week, and when possible a second person helped with the Clinic every four weeks.

“A total of 781 patients were seen over the year. Of these 135 were new ones. The majority of patients seen had convergent squints with or without amblyopia. Where necessary, the amblyopia was treated with occlusion therapy and most patients responded well to this. Patients with divergent, and vertical squints were also seen and treated as necessary, but this type of patient formed the minority.

“Twenty patients had squint surgery at Lincoln County Hospital. Orthoptic reports were done pre- and post-operatively.

“A total of 297 patients failed to keep their appointments. Of this number, 78 informed us that they would be unable to attend.”

I am grateful to Mr. A. H. Briggs, Consultant Ophthalmic Surgeon, who has submitted the following statistics for children from Kesteven seen at the hospital school eye clinic during 1972 with the comparable figures for 1971 in brackets:—

New cases sent for	..	..	..	..	169	(129)
Attended	..	..	..	..	121	(101)
Failed	..	..	..	..	48	(28)
Old cases sent for	..	..	..	..	918	(799)
Attended	..	..	..	..	643	(547)
Failed	..	..	..	..	275	(252)
Discharged	..	..	..	..	97	(61)
Glasses prescribed	..	..	..	..	153	(159)
Individual lenses	..	..	..	..	6	(5)
Authorised repairs	..	..	..	..	75	(17)

Mr. Briggs comments:—

“You will note, I am sure, that there has been a substantial increase in the work during the year in respect of both new and old patients and the considerably larger number of attendances. This has been due to some extent to an improvement in staffing position, which has enabled us to overtake arrears left over from 1970 and the position is now reasonably up to date.

“As always, I am very grateful for the co-operation and assistance of your staff at all times.”

I am also grateful to Dr. G. M. Barling, Consultant Ophthalmic Surgeon, who comments on the work of the clinics at Bourne and Stamford:—

“With regard to Barn Hill I have paid regular visits there and although the room is old fashioned and the equipment somewhat antiquated it seems to have become recognised as a centre where children can be refracted quickly and efficiently at specified dates and so far as I am concerned, the clinics run smoothly with full and satisfactory co-operation from the staff.

“With regard to the Health Centre at Bourne, I am now paying regular visits there on the fourth Thursday of each month and I am extremely impressed by the efficiency of the staff there and also by the very satisfactory way in which the new equipment has at last found its way to this clinic and altogether it would be impossible to find a more satisfactory type of layout for testing children for glasses.

“The work proceeds between Mr. Lyne and myself and I don’t think there is any waiting list to speak of.”

Orthopaedic Clinics

The number of schoolchildren examined at county clinics by the orthopaedic surgeon for the first time during the year was 159 and a total of 221 consultations was held as follows:—

				No. examined for first time during the year	Total No. of Examinations
Grantham ..	..	..	..	94	150
Sleaford ..	..	..	..	35	71
Totals	..	..	..	139	221

The Department's Physiotherapists have continued to attend the clinics at Grantham, Sleaford, Stamford and Bourne and have given treatment for a variety of conditions.

Schoolchildren made a total of 1,622 attendances for the following treatments:—

Ultra-Violet Light	..	..	..	245
Remedial Exercises	..	..	..	1,320
Massage	..	..	..	592
Faradism	..	..	..	10
Strappings	..	..	..	34
Galvanism	..	..	..	1

Ear, Nose and Throat Clinics

The Ear, Nose and Throat Clinics at the Beaconfield Clinic, Grantham, and the Riversdale Clinic, Sleaford, were attended by Mr. H. E. Porte. The peripatetic teacher of hearing impaired children attended these clinics, and the Speech Therapists attended as necessary. Details of attendances by schoolchildren were as follows:—

				First Attendances	Re-examinations
Beaconfield ..	..	..	..	46	7
Riversdale ..	..	..	..	25	5
Total	..	..	..	71	12

Further details relating to the treatment of diseases and defects of the ear, nose and throat are shown in Table B on page 73.

Mr. T. C. Ash, Peripatetic Teacher of Hearing Impaired Children comments:—

“During the year ended December 31st, 1972, some 445 hearing tests were carried out on children in Kesteven. Some of these were repeat tests on children already found to have a hearing loss, the rest were carried out at the request of medical officers, general practitioners, head teachers and

parents. Any children found to have a hearing loss were referred to an Ear, Nose and Throat Surgeon.

“In addition to the monthly ear, nose and throat clinics at Beaconsfield, Grantham and Riversdale, Sleaford, I also attended the weekly clinics at Grantham Hospital. These are a useful and necessary contact between education and medical services.

“There are on record 135 children who have a hearing impairment and the following table is an analysis of this number:—

Pre-school children with hearing aids	..	..	11
Children in normal schools with hearing aids	..	..	44
Children in special schools with hearing aids	..	..	4
Pre-school children under observation	..	..	2
Children in normal schools without hearing aids	..	..	53
Children in special schools without hearing aids	..	..	6
Children in residential schools for the deaf or partially hearing, or in partially hearing units	..	..	15

“Co-operation continues to be excellent between those working with and for hearing impaired children. This is of the utmost importance since medical and educational services must combine in order to give these children every opportunity to become useful members of society.”

Speech Therapy

Miss Glover comments “on the need for early referral of some pre-school children for speech therapy:—”

“There has been an increase in the number of children with cleft palates, who, although the palate functions beautifully after repair, suffer from delayed speech or dyslalia.

“Four severely subnormal children are receiving weekly treatment.”

Mrs. Long has made the following comments:—

“During 1972 I have seen 52 children at Bourne, 40 boys and 12 girls, including 15 pre-school children. The previous year’s increase in the number of pre-school children referred has been maintained during this year, most of these children being seen at intervals of a few weeks, with treatment consisting mainly of parent counselling. The majority of these children will be discharged by the time they start school.

“Among the school-age children undergoing treatment, articulation defects are the most frequent, together with poor language ability, i.e. limited vocabulary and poor sentence construction. Quite a large proportion of these children are of low to below average intelligence.

“There have been fewer children with an associated articulatory dyspraxia this year”

Mrs. Emery comments as follows:—

“I saw a total of 125 children during the year.

“More pre-school children were seen during the year which would appear to be beneficial to children, parents and therapist, helping to alleviate some of the problems early on, not least the problem of anxiety, which often becomes a contributing factor to the speech problem if indeed it has not been part of the original cause.

“The work at Stubton Hall Special School is still slow but very rewarding, as it is felt that communication for these boys is particularly important.

“I had more contact with the schools this year, which is very valuable to therapist, patients and teachers, but it would be helpful if more time were available to increase school visiting.

“I was very grateful for the opportunity to attend the four-day course at Manchester University in July on ‘The Investigation and Assessment of Children with Delayed Speech.’”

Handicapped Pupils

A summary of the information sent to the Department of Education and Science showing the number of handicapped children ascertained as needing admission to special schools or boarding homes during 1972, the number admitted and awaiting admission and those on the registers of special schools and boarding homes is given on pages 78 and 79.

Home tuition was arranged for three children unable to attend school because of illness and nine children received tuition whilst in hospital.

During the summer holiday period 14 handicapped children were seen under the Handicapped Pupils Regulations 1959.

Stubton Hall Boarding School

The Headmaster, Mr. H. J. Dixon, comments:—

“Stubton Hall School was established in 1952 with places for fifteen educationally subnormal boys aged between eleven and sixteen years. The number gradually increased and since 1958, when a new residential block was built, it has housed one hundred boys. The boys are now aged between ten and sixteen years of age.

“I.Q.s range from 50 to 100 + but all boys, on entry, have reading and/or arithmetic ages which are at least two years below the normal for their age. In addition approximately twenty-five have a secondary handicap such as a speech, hearing or physical defect; a small minority have a degree of maladjustment.

“A head teacher, deputy head teacher and seven assistant teachers care for the boys’ academic needs and a matron, deputy matron and twenty-four ancillary workers minister to their other requirements.

“The school is ably supported by the Deputy County Medical Officer, the Chief Dental Officer, the Educational Psychologist, a speech therapist and a peripatetic teacher of hearing impaired children and the School Medical Officer calls twice each week.

“A full programme of games against other schools is undertaken and twelve boys are currently taking part in a link course with Grantham College of Further Education. Evenings are spent in club activities such as stamp collecting, model making, basketry, photography and the Duke of Edinburgh’s Award Scheme.

“Little can be done to improve the boys’ standard in the basic subjects unless they are happy and secure in their environment and to this end, parents are encouraged to visit the school and take part in its activities and boys are allowed to spend regular weekends at home.”

Ambergate School

This is a day special school for sixty educationally subnormal pupils. The school takes boys aged from 7 to 11 years and girls aged from 7 to 16 years.

The Headmistress, Miss Bower, comments:—

“During the year eight children were admitted and eight left, six being transferred to other schools and two to take up employment. Among the present complement of children, fifteen wear glasses, one has a hearing aid, two have severe co-ordination problems, two have a degree of epilepsy, one had meningitis in early childhood and one is attending the child guidance clinic.

“There is close liaison between the school and other services; six children are receiving weekly speech therapy and three children, suffering from some degree of hearing loss, are regularly seen by the peripatetic teacher of the partially hearing.

“A physiotherapist has been appointed at the Beaconfield clinic and it is hoped to arrange regular sessions at the school to correct any postural defects among the senior girls.”

Wyndham Park Diagnostic Unit

This offers places for eight physically or mentally handicapped children aged between four and eight years.

Regular visits to the school were made by members of the medical staff, senior educational psychologist, speech therapist and peripatetic teacher of hearing impaired children.

The Superintendent, Miss Blakeborough, comments:—

“Nine children have attended the Unit during the year; of these, two children were transferred from infant schools due to learning and behaviour problems, another boy was admitted with a severe speech defect, and one girl with multiple handicaps.

“Three children left during the year; two were transferred to infant schools and one boy left to emigrate with his family to Australia.

“The children have been very varied in mental ability and physical handicap, but it has been possible for all the children to join in the nursery school programme for some part of each day.”

Sandon School

The Headmistress, Mrs. Surridge, comments:—

“During the year the number of pupils on the roll fluctuated between 58–60.

“There were 7 admissions and 9 leavers.

“A dental inspection was held in October. Head inspections were carried out monthly. The physiotherapist visited twice weekly and the peripatetic teacher for hearing impaired children monthly.”

Child Guidance Clinics

These are held at Grantham and Sleaford and in addition a number of children from the north and south of the County attend at the Lincoln and Peterborough child guidance clinics.

Dr. Holdway, Consultant Child Psychiatrist to the Grantham and Sleaford Child Guidance Clinics, has provided the following statistics of the work done at these two clinics during 1972:—

Table I

New referrals seen:

Grantham ..	..	..	..	..	44 + 3 reopened
Sleaford ..	..	..	..	..	18 + 1 reopened
Grantham Hospital		..	..	..	2
Total ..					<hr/> 64 + 4 reopened

Table II

Old Cases still under treatment:

Grantham ..	..	..	..	..	29
Sleaford ..	..	..	..	..	10
Total ..					<hr/> 39

Table III

Total individual attendances:

					By Children	By Parents
Grantham ..	..	..	..	..	237	231
Sleaford ..	..	..	..	..	96	86
Grantham Hospital ..	..	..	..	..	3	2
Bourne House Hostel	..	..	..	..	—	—
Deighton Close School	..	..	..	..	—	—
Eastfields Hostel ..	..	..	..	..	—	—
				Total ..	336	319

Table IV

New Referrals – Sex Incidence:

				Boys	Girls			
Grantham ..	..	..		32	12			
Sleaford ..	..	..		11	7			
Grantham Hospital ..	..	..		—	2	Total ..	64	

Table V

Referrals according to age groups:

	Boys	Girls			
Pre-school	1	1			
5–11 years	22	5			
11+	20	15	Total ..	64	

Table VI

Sources of referrals:

Grantham Hospital ..	..	..	..	2	
Principal School Medical Officer	..	..	..	4	
School Medical Officers	..	..	..	6	
General Medical Practitioners	..	..	..	32	+ 1 re-opened
Education Department	..	..	..	6	
Social Services Department	..	..	..	5	+ 1 re-opened
Magistrates' Courts	..	..	..	3	
Paediatrician	..	..	..	1	
E.N.T. Specialist	..	..	..	1	
Psychiatrists	..	..	..	2	
Parents ..	..	..	..	2	+ 2 re-opened
			Total ..	64	+ 4 re-opened

Table VII

Summary of attendances, recommendations and disposal of old and new cases:

Regular therapeutic attendances	..	..	46
Occasional attendances	..	..	26
Brief attendances	..	..	16
Single attendance	..	..	19
Total	..		107

Cases admitted to:—

Bourne House Hostel	..	..	4
Eastfields Hostel	..	..	3
Harmston Hall Hospital	..	..	1
Stubton Boarding School	..	..	3
Deighton Close School	..	..	1
Breckenbrough School	..	..	1

Dr. R. L. G. Wakeling, Consultant Child Psychiatrist to the Lincoln Child Guidance Clinic has informed me that during 1972 he saw fourteen new patients from Kesteven and reviewed fourteen cases. Nine of the new cases were boys and five were girls. The sources of referral were:—

General Medical Practitioners	..	..	9
Consultants	..	..	1
Others	..	..	4
Total	..		14

Dr. B. F. Whitehead, Consultant Child Psychiatrist to the Peterborough Child Guidance Clinic, has provided the following statistics relating to Kesteven patients:—

Number of new cases seen 27
These were referred by:—

School Medical Officer	..	..	4
General Practitioners	..	..	11
Consultants	..	..	10
Others	..	..	2

These were dealt with as follows:—

Treatment	..	..	12
Consultation	..	..	14
Observation	..	..	1
Cases under treatment brought forward from 1971			21
Number of cases closed	..	..	32
School Medical Officers notified	..	..	20

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

Staff

It is my pleasure to record an improvement in the staffing situation. In March, 1972, Mrs. V. Stratton, B.D.S. joined the staff as part-time dental officer based at Stamford. She was succeeded in October by Miss Pamela Dickens, B.D.S., who had been appointed full-time area dental officer in the South of the County.

At December 31st the professional dental staff consisted of the Chief Dental Officer and 2 Area Dental Officers for a school population of some 28,000 children, a ratio of one dental officer to more than 9,300 pupils. This compares with the national average of 1:6,400.

The authorised establishment of dental officers is four, but this number would be unable to carry out the aims of the School Dental Service, to inspect annually all the children in the schools and to provide treatment for all those who desired it. To quote from a report received from the Department of Education and Science subsequent to a visit in July by one of their dental officers, 'Eventual staffing requirements are difficult to assess but are likely to be 5 or 6 full time officers depending upon the demand for treatment'. My own estimate, however, is that at least seven officers would be required to give full coverage for all children in need of treatment.

The Clinics

The appointment of a part-time dental officer in March enabled the Stamford Clinic to be re-opened and later in the year with the appointment of a full-time area dental officer for South Kesteven, the Bourne Dental Clinic was brought into operation for the first time since the Health Centre was opened. By the end of the year all the clinics in the urban centres were fully functional.

No major items of equipment were purchased during the year but a dry heat steriliser was obtained for the Bourne Clinic. All the clinics are adequately equipped.

Fluoridation of Water Supplies

The addition of fluoride to public drinking supplies is responsible for a reduction in the incidence of dental decay in children if the water is ingested during the first ten years of life, that is, during the formative period of the teeth.

The water supply in the Urban District of Sleaford has been fluoridated since February 1969 and since then other sources of supply controlled by the Kesteven and the Lincoln and District Water Boards have been progressively fluoridated so that at the present time no fewer than 116 communities in Kesteven receive fluoridated water. This will in the years ahead have a profound beneficial effect upon the teeth of Kesteven's children.

Dental Inspections

The control of dental disease in children depends primarily upon regular inspections by dental officers in order that parents can be notified of the need for treatment when necessary. They can elect to have this carried out through the school service or under the general dental practitioner service.

During 1972 the dental officers inspected a total of 7,424 children, 5,342 being seen at the schools and 2,082 in the clinics. Four hundred and forty-two children received second inspections during the year.

Fifty-six per cent of the number inspected were found to require treatment and approximately 60% accepted to have this carried out in the clinics.

Dental Treatment

Owing to staffing difficulties, it is not possible to achieve the aim of the service – annual inspection of all schoolchildren with an offer of treatment being made to those in need of it.

The service available provides for annual inspection of children attending primary schools in urban areas and a recall system to provide continuity of treatment for the older pupils. An emergency service is available at the urban clinics for all children in the County.

One thousand nine hundred and twelve children received treatment during the year, making a total of 4,597 visits to the clinics. Conservation of teeth took up most of the dental officers' time, a total of 4,148 fillings being completed of which 2,984 were inserted in permanent teeth and the remainder in the primary teeth.

Two thousand seven hundred and fifty three teeth were extracted, which number included 2,152 primary or deciduous teeth.

Allowing for the fact that some of the permanent teeth extracted would be sound teeth removed for orthodontic purposes, the ratio of fillings inserted in permanent teeth to extractions of permanent teeth is of the order of 5:1, a reasonably satisfactory figure when one considers the scarcity of dentists throughout the County and the difficulty of obtaining regular dental treatment.

General anaesthesia which is used mainly for extractions was administered to 950 children.

Patients attending for emergency treatment numbered 643. Radiographs for diagnostic purposes numbered 200.

Sixteen new patients attended for orthodontic treatment during the year and thirteen cases were satisfactorily completed. It was found necessary to construct 28 appliances. Four children with complicated irregularities of the teeth were referred for specialist advice,

It was necessary to supply or replace a total of 28 dentures. Other forms of treatment provided included crowning of the teeth, inlays, prophylaxis and application of medicaments to teeth and gums.

INFECTIOUS AND CONTAGIOUS DISEASES

Nine hundred and sixty-one schoolchildren were notified by head teachers as suffering from infectious or contagious diseases. The main causes of absence from school were mumps, German measles and chicken pox.

TUBERCULOSIS

No children were notified as suffering from respiratory tuberculosis during the year.

One case of non-respiratory tuberculosis was reported during the year.

The following table shows the number of new notifications of school children in the age group 5–14 years as suffering from tuberculosis, respiratory and non-respiratory, received during the last five years:—

				RESPIRATORY (Lungs)	NON RESPIRATORY	TOTAL
1968	..	..	..	3	—	3
1969	..	..	..	—	—	—
1970	..	..	..	—	—	—
1971	..	..	..	—	1	1
1972	..	..	..	—	1	1

SCHOOL ENVIRONMENTAL HYGIENE

Twenty-six visits were recorded under this heading.

I am indebted to the County Architect for the following details of improvements carried out during the year at various schools:—

Resurfacing of Playgrounds

Mary King's School, Martin
South Hykeham County
Castle Bytham County
Bourne County
Great Hale C.E. (Controlled)

Heydour C.E. (Controlled)
Kirkby-la-Thorpe C.E. (Controlled)
Osbournby County
Sedgebrook C.E. (Controlled)
Grantham St. Wulframs C.E. (Cd.)
S.M.

Extensions to Playground

Sleaford William Alvey C.E. (Cd.)

Kirkby-la-Thorpe C.E. (Controlled)

Provision of Staff Toilet

Ancaster C.E. (Controlled)

Kitchen Improvements

Grantham Harrowby Infants
Grantham Belton Lane County
Little Bytham County
Langtoft County

Baston C.E. (Controlled)
North Hykeham Fosseway County
Heighington C.E. (Controlled)
Harmston C.E. (Aided)

School Swimming Baths

By the end of the year, the number of school swimming baths in operation had increased to twenty-five. There are also others proposed for the near future. A total of one hundred and ninety samples of water were obtained during the year from these baths and upon examination, nine were found to be unsatisfactory.

SCHOOL MEALS AND MILK

On the 31st December, 1972 156 schools were participating in the Scheme compared with 165 twelve months earlier. Of these 97 were provided with meals cooked on the premises (i.e. canteens), and 59 received meals brought in containers from cooking depots.

The following information obtained from the Director of Education shows the number of children in maintained schools in the County who had school dinners and milk at the last census carried out in 1972:—

Meals

(i) At Primary and Nursery Schools (inc. Special Schools)	..	10,909
(ii) At Secondary Modern and Comprehensive Schools	..	4,821
(iii) At Secondary Grammar Schools	.. ..	1,556

Milk

		$\frac{1}{3}$ pint daily
Primary, Nursery and Special Schools	.. ..	6,281

During the year the County Health Inspector advised on the quality and fitness of food supplies to various schools and kitchens and he condemned 129 pounds of food as being unfit for human consumption.

MEDICAL INSPECTION AND TREATMENT
Return for the year ended 31st December, 1972
MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY
SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (by year of birth)	No. of Pupils who received a full medical examination (2)	Physical Conditions of Pupils Inspected		Pupils found to require treatment (excluding dental diseases and infestation with vermin)	
		Satisfactory	Unsatisfactory	For defective vision (excluding squint)	For all other conditions
		No. (3)	No. (4)	(5)	(6)
1968 and later	20	20	—	—	4
1967	1,032	1,031	1	19	145
1966	1,271	1,271	—	55	203
1965	333	333	—	23	52
1964	96	96	—	8	4
1963	54	54	—	3	8
1962	1,144	1,143	1	110	112
1961	1,040	1,040	—	103	102
1960	289	289	—	28	28
1959	64	64	—	7	2
1958	832	832	—	121	38
1957 and earlier	827	827	—	113	39
Total	7,002	7,000	2	590	737
					1,181

Col. (3) total as a percentage of Col. (2) total—99.97 Col. (4) total as a percentage of Col. (2) total—0.03.

TABLE B.—OTHER INSPECTIONS

Number of Special Inspections	..	..	..	1,602
Number of Re-Inspections	..	..	..	3,652
				<hr/>
TOTAL	...	..		5,254

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	..	..	...	...	..	62,939
(b) Total number of individual pupils found to be infested	..	..	..	...	..	269
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	..	..	...	..	..	NIL
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	..	...	..	..	..	NIL

PART II

TABLE A.—EYE DISEASES, DEFECTIVE VISION
AND SQUINT

	No. of cases known to have been dealt with
External and other, excluding errors of refraction and squint	119
Errors of refraction (including squint)	2,196
Total ..	<u>2,315</u>
Number of pupils for whom spectacles were prescribed	838

TABLE B.—DISEASES AND DEFECTS OF EAR,
NOSE AND THROAT

	No. of cases known to have been dealt with
Received operative treatment:—	
(a) for diseases of the ear	69
(b) for adenoids and chronic tonsilitis	181
(c) for other nose and throat conditions	24
Received other forms of treatment (at School Clinics)	11
Total ..	<u>285</u>
Total number of pupils in schools who are known to have been provided with hearing aids:—	
(a) in 1972	20
(b) in previous years	42
Total ..	<u>62</u>

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	No. of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	253
(b) Pupils treated at school for postural defects	3
Total ...	<u>256</u>

TABLE D.—**DISEASES OF THE SKIN**

(Excluding uncleanliness, for which see Table C of Part I)

					No. of cases known to have been treated
Ringworm—(a) Scalp .. .. .	..	..	..	..	—
(b) Body .. .. .	..	..	..	..	6
Scabies .. .. .	..	..	..	..	16
Impetigo .. .. .	..	..	..	..	7
Other skin diseases .. .. .	..	..	..	..	—
				Total ..	<hr/> 29 <hr/>

TABLE E.—**CHILD GUIDANCE TREATMENT**

		No. of cases known to have been treated
Pupils treated at Child Guidance clinics .. .. .	..	205

TABLE F.—**SPEECH THERAPY**

		No. of cases known to have been treated
Pupils treated by speech therapists .. .. .	..	378

TABLE G.—**OTHER TREATMENT GIVEN**

		No. of cases known to have been dealt with
(a) Pupils with minor ailments .. .. .	..	1,035
(b) Pupils who received convalescent treatment under School Health Service arrangements .. .. .	..	—
(c) Pupils who received B.C.G. vaccination .. .. .	..	1,782
(d) Other than (a), (b) and (c) above:		
Medical .. .. .	..	65
Surgical .. .. .	..	100
Accidents .. .. .	..	65
	Total ..	<hr/> 3,047 <hr/>

TABLE H

**DENTAL INSPECTION AND TREATMENT CARRIED OUT BY
THE AUTHORITY DURING THE YEAR ENDED 31st DECEMBER,
1972**

1.—INSPECTIONS

(a) First inspection at school. No. of pupils	5,342
(b) First inspection at clinic. No. of pupils	2,082
No. of (a) plus (b) found to require treatment	4,400
No. of (a) plus (b) offered treatment	3,155
(c) Pupils re-inspected at school or clinic	442
No. of (c) found to require treatment	261

2.—VISITS AND TREATMENT	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	953	795	164	1,912
Subsequent visits	972	1,381	332	2,685
Total visits	1,925	2,176	496	4,597
Additional courses of treatment commenced	101	75	26	202
Total courses commenced	1,054	870	190	2,114
Courses of treatment completed	—	—	—	1,931
Fillings in permanent teeth	737	1,734	513	2,984
Fillings in deciduous teeth	1,073	151	—	1,224
Permanent teeth filled	547	1,558	436	2,541
Deciduous teeth filled	724	146	—	870
Permanent teeth extracted	95	392	114	601
Deciduous teeth extracted	1,731	521	—	2,252
General anaesthetics	651	244	55	950
Emergencies	356	239	48	643
Number of Pupils X-rayed				200
Prophylaxis				395
Teeth otherwise conserved				75
No. of teeth root filled				32
Inlays				6
Crowns				6

3.—ORTHODONTICS	New cases commenced during year ..	16
	Cases completed during year ..	13
	Cases discontinued during year ..	4
	No. of removable appliances fitted ..	28
	No. of fixed appliances fitted ..	—
	Pupils referred to Hospital Consultant ..	4

4.—DENTURES	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time) ..	—	—	2	2
Pupils supplied with other dentures (first time)	1	8	10	19
No. of Dentures supplied	1	8	12	21

5.—ANAESTHETICS	General Anaesthetics administered by Dental Officers	—
6.—SESSIONS	Sessions devoted to treatment ..	844
	Sessions devoted to inspection ..	46
	Sessions devoted to Dental Health Education	—

TABLE 1

**INDEPENDENT SCHOOLS USED BY THE AUTHORITY
UNDER SECTION 6 OF THE EDUCATION (MISCELLANEOUS
PROVISIONS) ACT, 1953, IN RESPECT OF HANDICAPPED
PUPILS**

FULL name and address of school (1)	Whether for Boys, Girls or both (2)	Number of pupils whose fees are being paid in whole or part by the L.E.A. (3)		Category of handicap of each pupil in Col. 3 (4)	Age range of pupils in Col. 3 (5)
		Boys	Girls		
Shotton Hall School, Shrewsbury	Boys	1	—	Mal- adjusted	9-16 years
Heanton School, Barnstaple	Boys	1	—	Mal- adjusted	11-16 years
Camphill School, (Rudolph Steiner), Aberdeen	Both	—	1	E.S.N.	5-16 years
Irton Hall, Cumberland	Boys	1	—	Physically Handicapped	5-16 years
Dedisham School, Slinfold, Sussex	Both	1*	—	Mal- adjusted	8-16 years
Peredur School, East Grinstead	Boys	1*	—	Mal- adjusted	11-16 years
Bylands School, Hants.	Boys	1	—	Mal- adjusted	11-16 years
Pitt House School, Torquay	Boys	1	—	Mal- adjusted	11-16 years

* Autistic children

TABLE J

Handicapped Pupils requiring Education at Special Schools or Boarding in Boarding Homes

During the calendar year ended 31st December, 1972:		Blind (1)	P.S. (2)	Deaf (3)	Pt.Hg. (4)	P.H. (5)	Del. (6)	Mal. (7)	E.S.N. (8)	Epil. (9)	Sp.Def. (10)	TOTAL (11)
A	No. of handicapped children who were newly assessed as needing special educational treatment at special schools or in boarding homes											
	boys	—	1	—	2	2	—	7	25	—	—	37
	girls	—	—	—	2	4	—	6	17	—	—	29
78												
B	No. of children who were newly placed in special schools (other than hospital special schools) or boarding homes.											
	(i) of those included at A above	—	—	—	—	1	—	5	6	—	—	12
	(ii) of those assessed prior to January 1972	—	—	—	2	4	—	6	1	—	—	11
	(iii) TOTAL newly placed B(i) and (ii)	—	—	—	—	—	—	3	31	—	—	36
		—	—	—	—	—	—	—	12	—	—	12
		—	—	—	2	1	—	8	37	—	—	48
		—	—	—	—	4	—	6	13	—	—	23

Handicapped Pupils awaiting placement (1-5) in Special Schools and receiving special Educational treatment (6-12)

As at 25th January, 1973:—	Blind (1)	P.S. (2)	Deaf (3)	Pt.Hg. (4)	P.H. (5)	Del. (6)	Mal. (7)	E.S.N. (8)	Epil. (9)	Sp.Def. (10)	TOTAL (11)
No. of children from the Authority's area who were awaiting places in special schools.											
Under 5 years of age:—											
1. waiting before 1/1/72:											
(a) day places											
(b) boarding places											
2. newly assessed since 1/1/72:											
(a) day places	1	1		2							2
(b) boarding places				1							3
Aged 5 years and over:—											
3. waiting before 1/1/72:											
(a) day places					2			64			64
(b) boarding places								27			29
4. newly assessed since 1/1/72:											
(a) day places								14			14
(b) boarding places							3	10			10
								3			6
								1			1
5. Total number of children awaiting admission to Special schools—total of above											
(a) day places				1				49			50
(b) boarding places				1				39			40
	1	1			1		3	26			32
				1	1			5			7
6. No. of pupils from the Authority's area who were on the registers of:—											
Maintained special schools, including attached units and hospital special schools					5			71			76
day					6			84			90
boarding	3	3		1	1		4	96			108
girls		1		2	1	1		18			23
7. Non-maintained special schools including attached units day and hospital special schools											
boys											
girls											
boarding			5		2		1		1		9
girls			1	1	3				1		6
8. Independent schools under arrangements made by the authority											
boys											
girls											
boarding							6				6
girls											
9. Special classes in ordinary schools				2							2
girls				3							3
10. Total on registers:											
(a) day				2	5			71			78
(b) boarding				3	6			84			93
	3	3	5	1	3		11	96	1		123
		1	1	3	4	1		18	1		29
11. No. of children from the Authority's area who were boarded in homes and not already included above.							13				13
							7				7
12. No. of handicapped pupils being educated under arrangements made by the authority in accordance with Section 56 of the Education Act, 1944											
(i) in hospitals											
boys											
girls											
(ii) in other groups, e.g. units for spastics, etc.					1						1
(iii) at home					6						6
					1			1			2
					1						1
13. Total number of handicapped children awaiting places in special schools; receiving education in special schools; independent schools; special classes and units; under Section 56 of the Education Act, 1944; and boarded in Homes	4	4	5	4	11		27	243	1		299
		1	1	8	18	1	7	146	1		183



TABLE L.—HANDICAPPED PUPILS, 1972

BLIND	PARTIALLY SIGHTED		DEAF		PARTIAL HEARING		EDUCATION-ALLY SUB-NORMAL		EPILEPTIC		MALADJUSTED		PHYSICALLY HANDICAPPED		SPEECH DEFECT		DELICATE	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
No. on Register at 1.1.72 ..	3	—	4	2	9	2	5	4	257	150	1	2	25	8	9	9	2	1
No. of new ascertainment during year	—	—	1	—	—	—	2	2	25	17	—	—	5	6	3	4	—	1
Inward transfers and ex section 57 cases	1	—	1	—	—	—	—	2	3	4	1	1	1	—	3	1	—	—
No. removed from Register during year including outward transfers ..	—	—	—	—	4	1	4	—	25	38	—	1	1	5	4	2	2	—
No. on Register at 31.12.72 ..	4	—	6	2	5	1	3	8	260	133	2	2	30	9	11	12	—	2

TABLE M

The following is a summary of cases seen by the Speech Therapists during 1972:—

1. Analysis of Defects Treated:—	MALES		FEMALES	
	Normal I.Q.	E.S.N.	Normal I.Q.	E.S.N.
Stammer	64	24	36	—
Dyslalic	401	47	154	33
Cleft Palate	29	16	16	6
Excessive Nasality	—	10	—	—
De-nasalized Speech	—	—	—	—
Clutter	8	—	—	—
2. Defects due to:—				
Dysarthia	11	—	—	—
Hearing Loss	19	4	—	—
Retarded Speech	38	31	30	—
Dysphonia	—	1	3	—
Lateral Sigmatism	19	4	5	1
Interdental Sigmatism	19	1	3	—
Aphasia	—	5	1	13

	Males				Females
New cases seen	75	45
Cases discharged	62	27
Total attendances	1,617	654

INDEX

	Page No.		Page No.
Acute encephalitis	24, 25	Family planning	33
Air pollution	54	Fluoridation	54, 67
Ambulance service	42	Food and drugs	52, 53
Analgesia	39	Food hygiene	51
Ante-natal care	32	Food poisoning	24, 25
Anthrax	24, 52	Fowl Pest	52
Anthrax vaccination	30		
		General statistics	14
B.C.G. vaccination	31, 74		
Births, live	14, 15, 19	Handicapped pupils	62, 77, 78, 79, 80
Births, premature	33, 36	Health centres	49
Birth rate	14, 15, 19	Health committee	7
Births, still	14, 15, 19	Health education	45
Blind and partially sighted persons	49, 50, 78, 79, 80	Health visiting	38
Brucellosis	52	Home nursing	40
		Hospital confinements	33, 39
Cancer, deaths	16, 20, 22	Hospital, discharge from	39, 48
Care and after-care	45	Hospital provision for mothers and children	33
Care of mothers and young children	32	Housing, nurses'	41
Causes of death, main	16		
Cervical cytology	47, 48	Illegitimacy	14, 15
Child guidance	64-66, 74	Immigrants	47
Children, physical condition of	56, 71	Immunisation	29
Chiropody service	45, 46	Infant mortality	14, 15, 16, 17
Colour vision	55	Infant welfare centres	32
Committees	7, 8	Infectious diseases	24, 25, 69
Congenital abnormalities	35	Infective jaundice	24, 25
Consultant services	34, 57-61		
		Live births	14, 15, 18, 19
Dairies	51, 52		
Death rates	15, 16, 17, 19	Malaria	24
Deaths, all causes	16, 19, 20, 21, 22, 23	Marie Curie Memorial Foundation	41
Deaths, cancer	20, 22	Maternity outfits, provision of	35
Deaths, infant	15, 16, 17, 19	Meals and milk, schools	52, 70
Deaths, tuberculosis	20, 22, 26, 27	Measles	24, 25
Dental care	33, 67, 68, 69, 75, 76	Measles vaccination	30
Development plan	49	Medical inspection, school- children	55, 56, 57, 71, 72
Diphtheria, immunisation	29	Meningitis	24, 25
Discharge from hospital	39, 48	Midwifery	38, 39
Distribution of welfare foods	37	Milk supplies and sampling	51, 52, 53
Domiciliary confinements	39	Milk, in schools	52, 70
Dysentery	24, 25	Mortality, infant	14, 15, 16, 17
		Mortality, maternal	16
Early neonatal deaths	15	Mortality, neonatal	15
Ear, nose and throat clinics	34, 56, 60, 61, 73	Mortality, perinatal	15
Education committee	8		
Environmental health	51, 70		
Epidemiology	24		
Equipment, home nursing	41, 48		
Eye clinics	34, 73		

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